



# *Provider Profile* **Report Card**

## **Consumer Survey Results of Treatment for Adults with Serious Mental Illness**

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Indiana Family and Social Services Administration  
Division of Mental Health and Addiction  
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## Introduction

### *Why do you have a Provider Report Card?*

The purpose of this Hoosier Assurance Plan Provider Report Card is to organize and publish information on public mental health services for consumers and their family members. It is hoped that the information presented here will help the residents of Indiana choose mental health services that meet their needs.

### *What is a Managed Care Provider (MCP)?*

The Division of Mental Health (DMH) contracts with 29 mental health service agencies that receive managed care funding. The 29 agencies are called Managed Care Providers (MCP). Obviously, there are many more mental health service agencies out there but they do not receive managed care funding through DMH. By Indiana law, all 29 providers offer the same core set of ten mental health services called the “continuum of care.” (☞ **Hint:** find a list of all the services in the continuum of care in the glossary.) However, each MCP is different and does things differently. All have their strengths and weaknesses.

### *Who do these Managed Care Providers serve?*

The three populations that will be focused on by this report card are (1) adults with serious mental illness (SMI), (2) children and adolescents with serious emotional disorders (SED), and (3) persons with chronic addictions or substance abuse (CA/SA). (☞ **Hint:** look in the glossary for definitions of these populations.) Not all providers serve all these populations. For example, some providers may serve only children and adolescents and some may only serve persons with addictions. This report card focuses on the MCPs that serve adults with serious mental illness.

### *Where did you get this information?*

We got the information in three ways. *One* way is by having each mental care provider fill out a survey about the services they offer. A *second* way is through calling over 3,000 consumers of mental health and addiction services and asking their opinions about the services they receive. A *third* way is through the Hoosier Assurance Plan Assessment Instrument outcomes. Briefly, the Hoosier Assurance Plan Assessment Instrument is an assessment completed by clinicians in an effort to determine if a consumer is eligible for managed care funding through DMH. One thing the assessment instrument scores is how well the consumer is functioning in his or her life. The outcomes that we publish in the report card are the changes in scoring over time.

### *What's new this year?*

This is our fifth year of publishing the report card. This year we will have a total of seven report cards. Each report card will focus on one of three topics for each population. The first report card topic will be the results from the provider survey. The second report card topic will be the results from the consumer telephone survey. The third report card subject will be the outcomes from the Hoosier Assurance Plan Assessment Instruments. The report cards are broken down as follows:

1. The provider survey results for services for adults with serious mental illness.
2. The provider survey results for services for children and adolescents with serious emotional disorders.
3. The provider survey results for services for persons with chronic addictions.
4. The consumer telephone survey results for services for adults with serious mental illness. (☞ **This is the report card you are reading.**)
5. The consumer telephone survey results for services for children and adolescents with serious emotional disorders.
6. The Hoosier Assurance Plan Assessment Instrument outcomes for adults with serious mental illness.
7. The Hoosier Assurance Plan Assessment Instrument outcomes for persons with chronic addictions.

## How do I read this Report Card?

This report card displays the information we received from a telephone survey of consumers. A sample of consumers who were in service the previous year are telephoned. This report card is based on telephone calls made in State Fiscal Year (SFY) 2000 (July 1, 1999 to June 30, 2000). They were made to people in service during SFY 1999 (July 1, 1998 to June 30, 1999). On average, each call lasted 18 minutes.

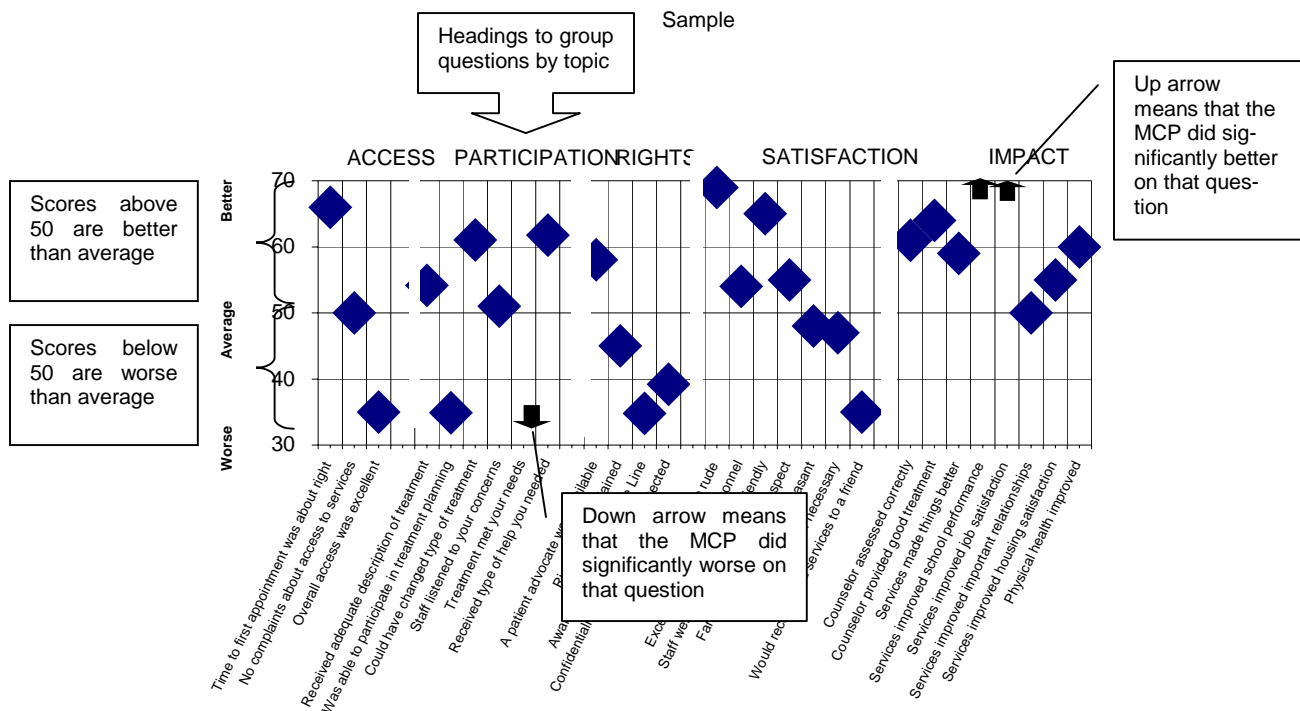
### Tell me about the provider pages

Each provider has one page that summarizes the results of the survey. These results are displayed through a graph that helps compare the MCPs to each other. A provider that did better than the others would be above the average of 50%.

### Tell me about the graphs on the provider pages

Each provider has a graph that shows how they compare to other providers in certain categories. The scores are shown in what is called a "T" score. Everything is based on an average. The graph shows the middle, marked with a "50" as the average of all the providers on each particular category. If the dot is above the "50" line, then the provider is "better than average." If the dot is below the "50" line then, the provider is "worse than average." (Reminder: this scale compares providers and does not rank them.) Where an agency is very good or very poor, an arrow shows that their score is "off the graph".

The graphs have 27 items, each relating to a question or series of questions on the telephone survey. To make them easier to understand and read, the items are divided into five groups of questions: Access, Participation, Rights, Satisfaction, and Impact.



Overall, MCP evaluation changes are improved, compared to last year on the telephone survey. Seven measures had average responses at least 2.0% higher than last year, and none had averages responses more than 2.0% lower. The lower scores for a single provider improved by 5.0% or more on six questions, falling for only two; and the highest provider average rose 5.0% or more for as many measures that fell – three each. These significant changes (up or down) in the average, maximum and minimum scores for the providers are described in the following narrative.

## Access

For services to do any good, people need to be able to get to them. Three scores are given on Access.

### *Time to first appointment was about right*

Consumers were asked about the time it took to get a first appointment. Their options were "too long," "too short," and "the right amount of time." The report card looks at the proportion of consumers answering positively, or "the right amount of time."

The lowest percent of positive answers that any center received was 70.8%, which is 5.2% higher than last year.

### *No complaints about access to services*

This year the survey asked a series of yes or no questions.

"Please tell me if any of the following has ever happened at your MCP while you were receiving services."

- Were you unable to get an appointment at a convenient time?
- Were you dropped from a program against your wishes?
- Were you refused services due to loss of insurance, such as Medicaid?
- Were you refused services due to an outstanding bill?

An average of 71.3% of those surveyed answered "no" to all four questions, not significantly

changed from last year. However, both the minimum and maximum provider scores on this question fell over 5%.

Access	Minimum	Maximum
Time to first appointment was about right	70.8%	93.0%
No complaints about access	50.9%	82.1%
Overall access was excellent	35.1%	64.8%

### *Overall access was excellent*

After the last four questions were asked, the survey asked the consumer: "Overall, would you say your access to services was: excellent, good, fair, poor?" (47.7% said excellent, up 2.2% from last year.) The maximum score for a single provider also rose, by 7.7%.

## Participation

The Division of Mental Health believes that for behavioral health services to work, consumers must participate in their own service planning. The survey asks a series of questions that attempt to learn if consumers do participate to the fullest extent.

### *Received adequate description of treatment*

Consumers were asked if they thought they received an adequate description of the treatment that was planned for them. Overall, 85.8% said "yes". Here, the maximum score received by a provider rose by 5.2%.

### *Were able to participate in treatment planning*

On another question, consumers were asked if they felt they were able to participate in their own treatment planning. Overall, 82.0% said that they did. This ranged from 73.6% to 94.3%.

### *Could have changed type of treatment*

The survey also asked consumers if they felt free to request a change in the type of treatment they were receiving. 73.1% overall said yes, ranging

from 54.2% at the most restrictive provider to 84.3% at the least.

Participation	Minimum	Maximum
Received adequate description of treatment	73.6%	94.3%
Were able to participate in treatment planning	73.2%	91.1%
Could have changed type of treatment	54.2%	84.3%
Staff listened to your concerns	79.6%	96.4%
Treatment met your needs	82.5%	96.4%
Received type of help you needed	74.1%	91.1%

### *Staff listened to your concerns / treatment met your needs*

Consumers responded very positively about the staff that actually provided services. Overall, 90.3% said that the staff listened to their concerns about treatment, and 90.4% felt the staff tried to make the treatment program meet their needs, both scores improved, by 2.2% and 2.9% respectively.

### *Received type of help you needed*

Finally, 84.6% said that they received the type of help that they needed, up 2.8% from last year.

## **Rights**

### *A patient advocate was available / rights were explained*

Each consumer has a long list of rights guaranteed by federal law, state law, Division of Mental Health rules and regulations, and by the provider's own ethical requirements.

Almost all providers identify an individual as a patient advocate. (For more information on this, you should look at Report Cards Volume 3, Issues 1, 2, or 3.) From the survey, about half

(53.2%) of people surveyed knew that a patient advocate was available.

A greater number, 78.1% overall, said that their rights were explained to them. Here, the minimum score received by a provider rose by 6.7%.

Rights	Minimum	Maximum
A patient advocate was available	38.5%	72.2%
Rights were explained	69.2%	88.9%
Confidentiality and privacy was protected	62.5%	85.7%

### *Confidentiality and privacy was protected*

A very important right is to privacy and confidentiality. Overall, 77.3% of the people felt that this was dealt with very well.

## **Satisfaction**

It is important that people can get to services, that the services help, and that their rights are protected. It is also important the overall experience is at least not unpleasant. Several questions assess consumer satisfaction.

### *No staff were rude /Excellent treatment by personnel*

This year a series of questions were asked together. Did any of the following bad things ever happen to you?

- Were treated rudely by the billing department?
- Were you treated rudely by a counselor or case manager?
- Were you treated rudely by the secretarial staff?
- Overall, would you say the way you were treated by personnel was excellent, good, fair, or poor?

On average, 78.9% of the people were not ever treated rudely by billing, clerical, or clinical

staff. However, only 48.8% of the people overall said that they received excellent service.

When asked more general questions about staff, 94.4% said staff were approachable and friendly, 94.2% said that their family was treated with respect, and 95.6% said that the environment was pleasant. In the latter two cases, at least one agency received positive comments by everybody asked. However, the lowest score received by a provider on the last of these questions fell this year by 5.4%.

Satisfaction	Minimum	Maximum
No staff were rude	64.9%	85.7%
Excellent treatment by personnel	28.1%	63.2%
Staff were approachable and friendly	86.0%	98.2%
Family was treated with respect	81.8%	100.0%
Environment was pleasant	89.3%	100.0%
I would go back if necessary	74.5%	94.5%
Would recommend services to a friend	75.0%	94.4%

### *Would you go back if necessary?*

A very common question is to ask consumers, “If you or a family member were to need additional treatment, would you return to the same provider?” The average proportion of “yes” responses that a provider received was 84.7%.

### *Would you recommend this provider to a friend?*

Another common question is asked “Would you recommend this provider to a friend?”. The average score here was 86.9% saying “yes”.

## **Impact of Services**

Why would somebody receive services unless they thought they would work? We need to

know of the services have an impact on people's lives.

### *Counselor assessed correctly*

Eighty-six percent (86.6%) of the consumers reported that their counselor assessed their problems competently.

### *Counselor provided good treatment*

Consumers were then asked if their counselor did a competent job in treating them. Positive answers came from 86.4% of those surveyed.

### *Services made things better?*

We told consumers that we would like to know how much the services helped. They could answer that they felt the services made things much better, somewhat better, made no difference, made things somewhat worse or much worse. On average, 45.6% felt that the services that received made things better. On this question, the lowest score received by a provider rose by 5.9%, while the highest score fell by 9.3%, indicating greater consistency across all providers.

Impact	Minimum	Maximum
Counselor assessed competently	80.4%	94.3%
Counselor treated competently	78.2%	91.1%
Services made things better	34.5%	58.5%
Services improved job satisfaction	25.0%	76.5%
Services improved important relationships	41.1%	69.6%
Services improved housing satisfaction	40.0%	61.2%
Physical health improved	37.7%	69.1%

### *Services improved job satisfaction*

Consumers were asked if, as a result of the services they received, they were more, the same, or less satisfied with their job. The average score

of 50.6% rose 5.3% from last year, while the minimum score rose 9.6% and the maximum score fell 6.8%.

### *Services improved important relationships*

Consumers were then asked if, as a result of the services they received, they were more, the same, or less satisfied with their important personal relationships. The proportion of consumers reporting that important personal relationships have improved was 56.0%.

### *Services improved housing satisfaction*

Finally, consumers were asked if, as a result of the services they received, they were more, the same, or less satisfied with their living arrangements. Providers received higher scores than last year, with an average of 51.1%, up 1.7%.

### *Physical health improved*

There is a widespread belief that improving a person's mental health also improves their physical health. Three sets of questions on the survey related to this belief. People were asked to remember how many days they spent in the hospital, trips they made to the emergency room, and visits they made to a doctor, all for physical health reasons, in the year before they were in treatment. They were then asked the same questions for the most recent year. The medical offset questions are the proportions of people who used less of these physical health services in the most recent year.

Overall, 56.7% of the providers received a positive score on this item, similar to last year's average.



# Midtown Community Mental Health Center

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## CEO

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Executive Director

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## Consumer Contact

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Care Business Director

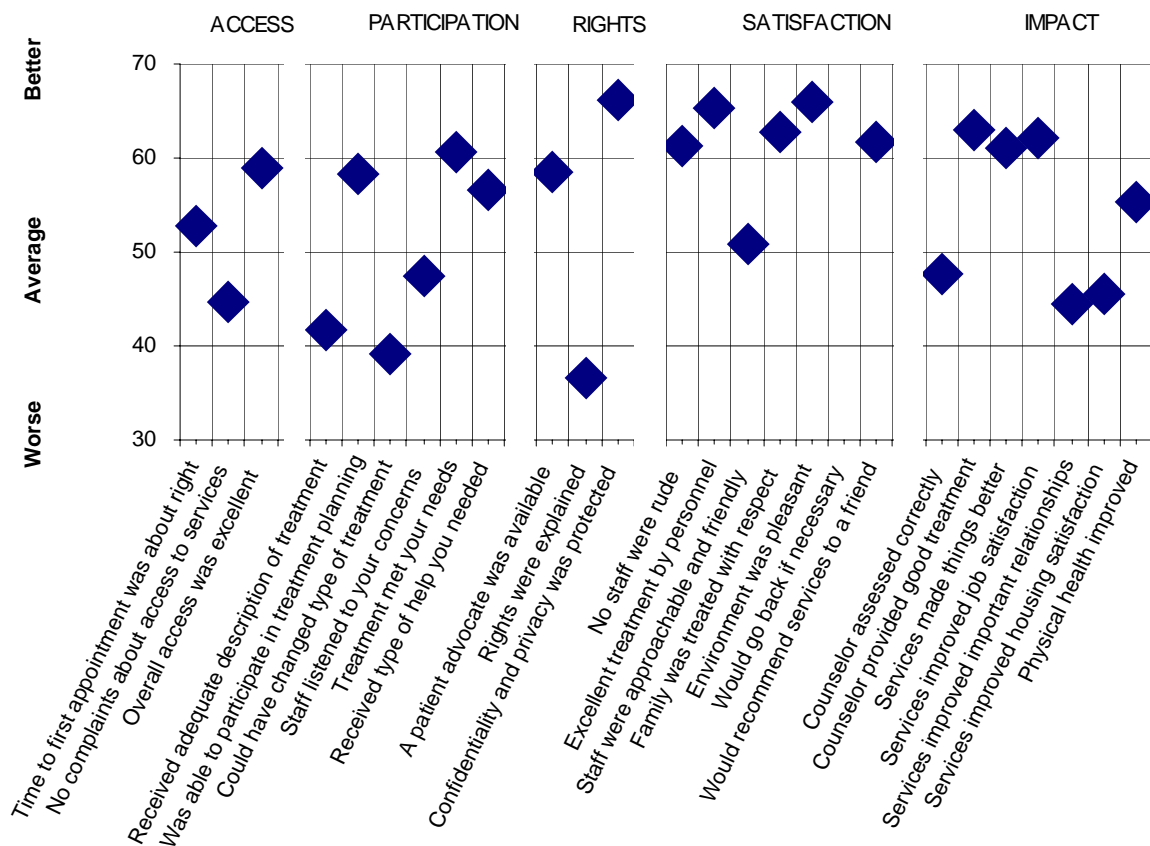
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# LifeSpring Mental Health Center

(402)

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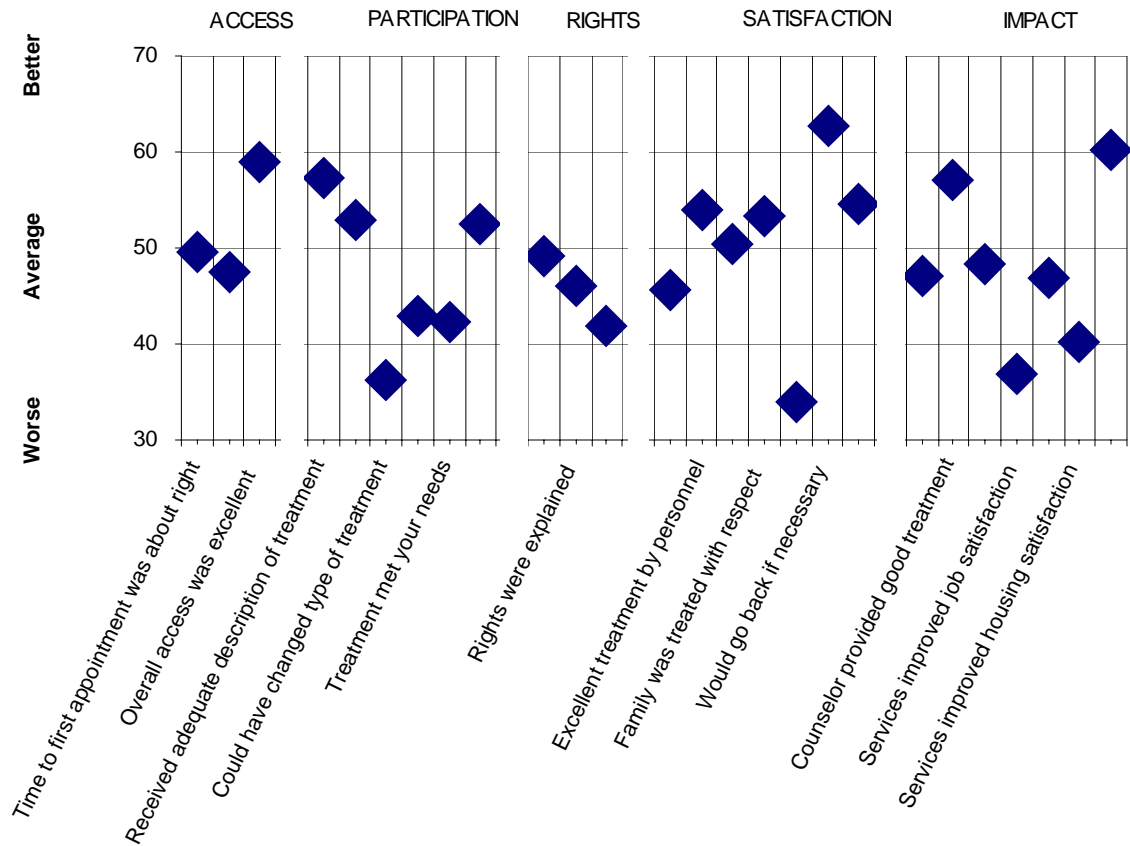
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CEO  
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## Consumer Contact

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# Samaritan Center

(403)

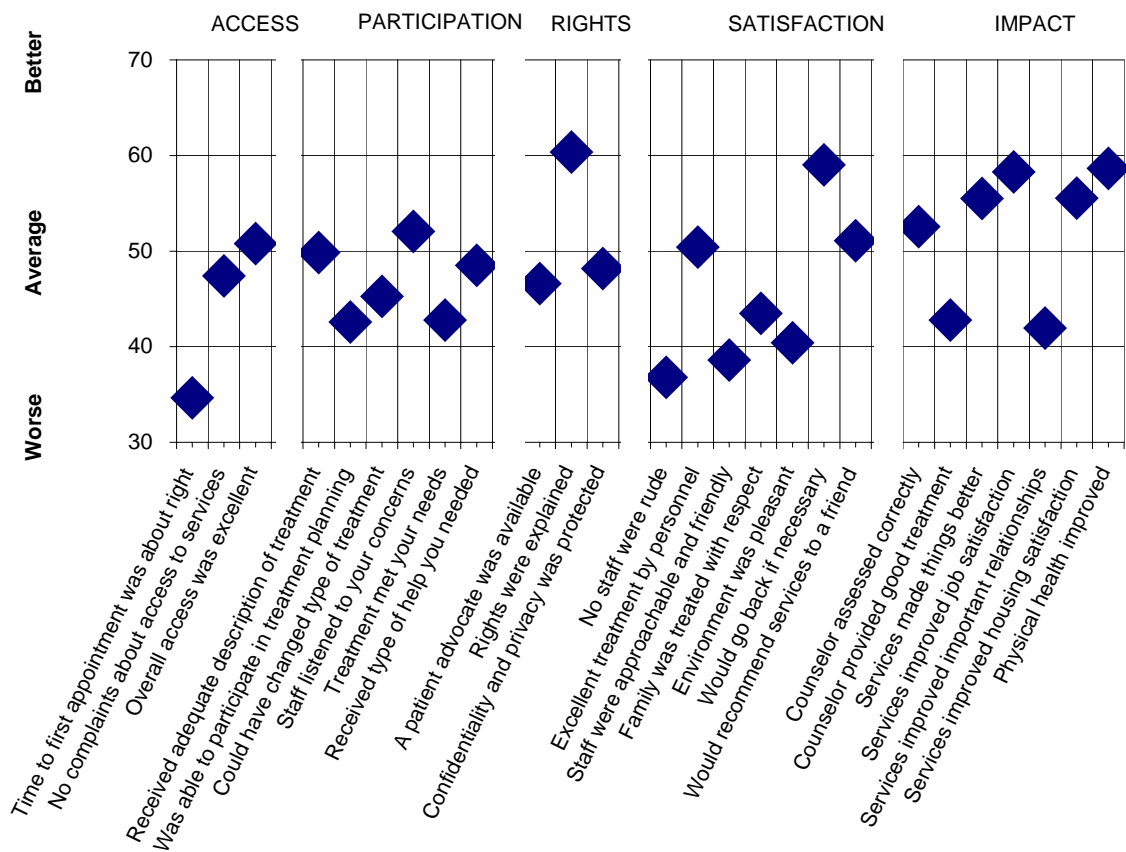
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# SouthWestern Indiana Mental Health Center, Inc.

(404)

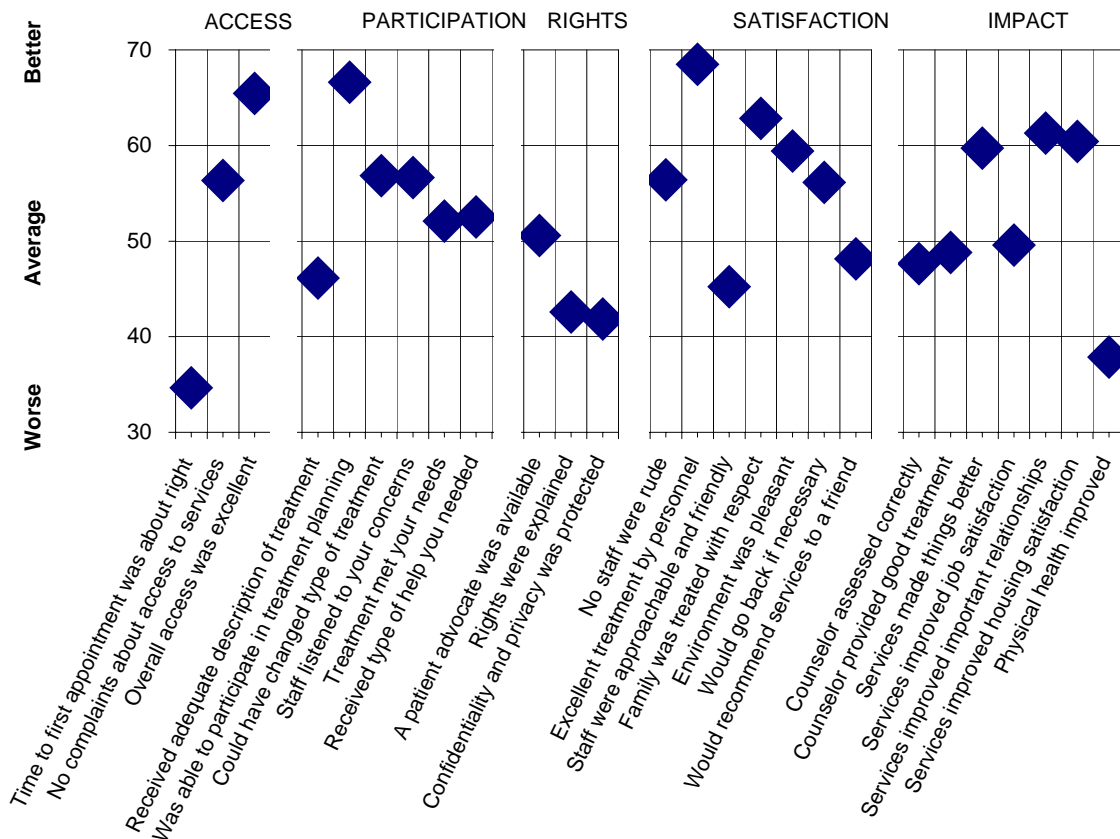
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# Hamilton Center, Inc.

(405)

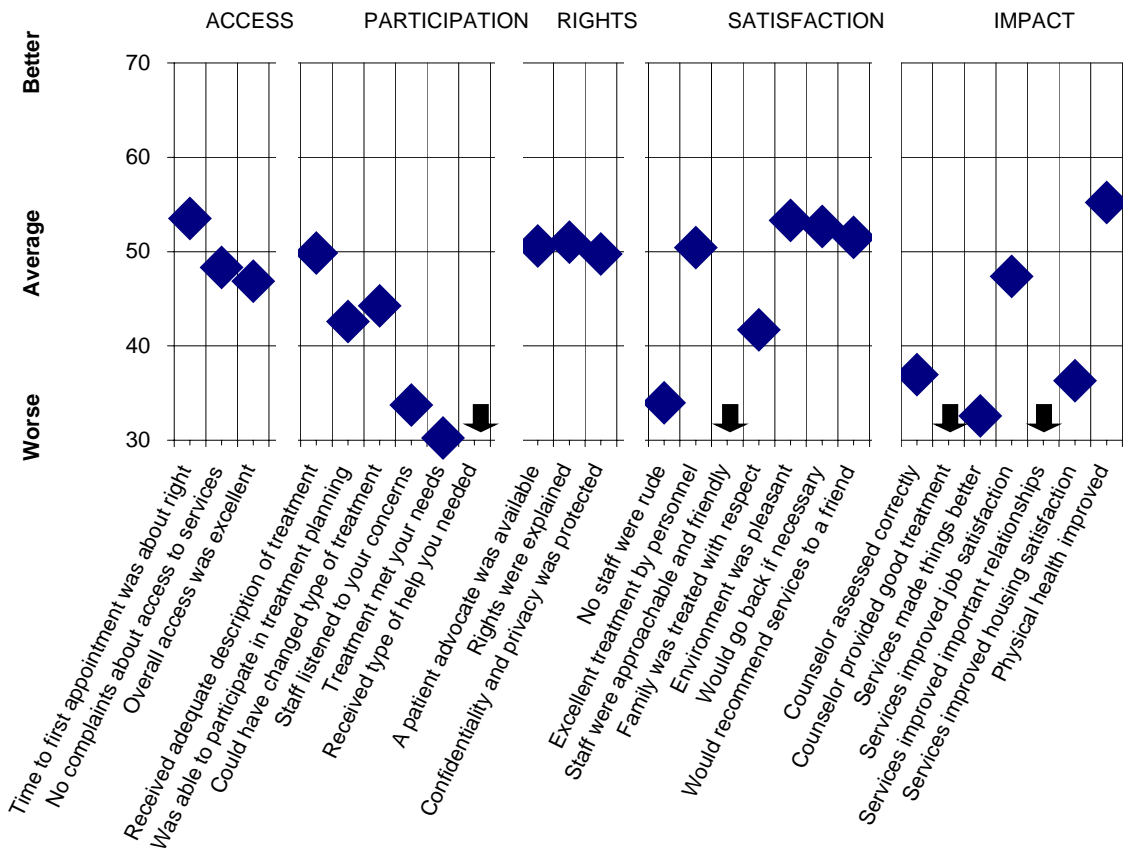
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# Madison Center and Hospital, Inc.

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CEO

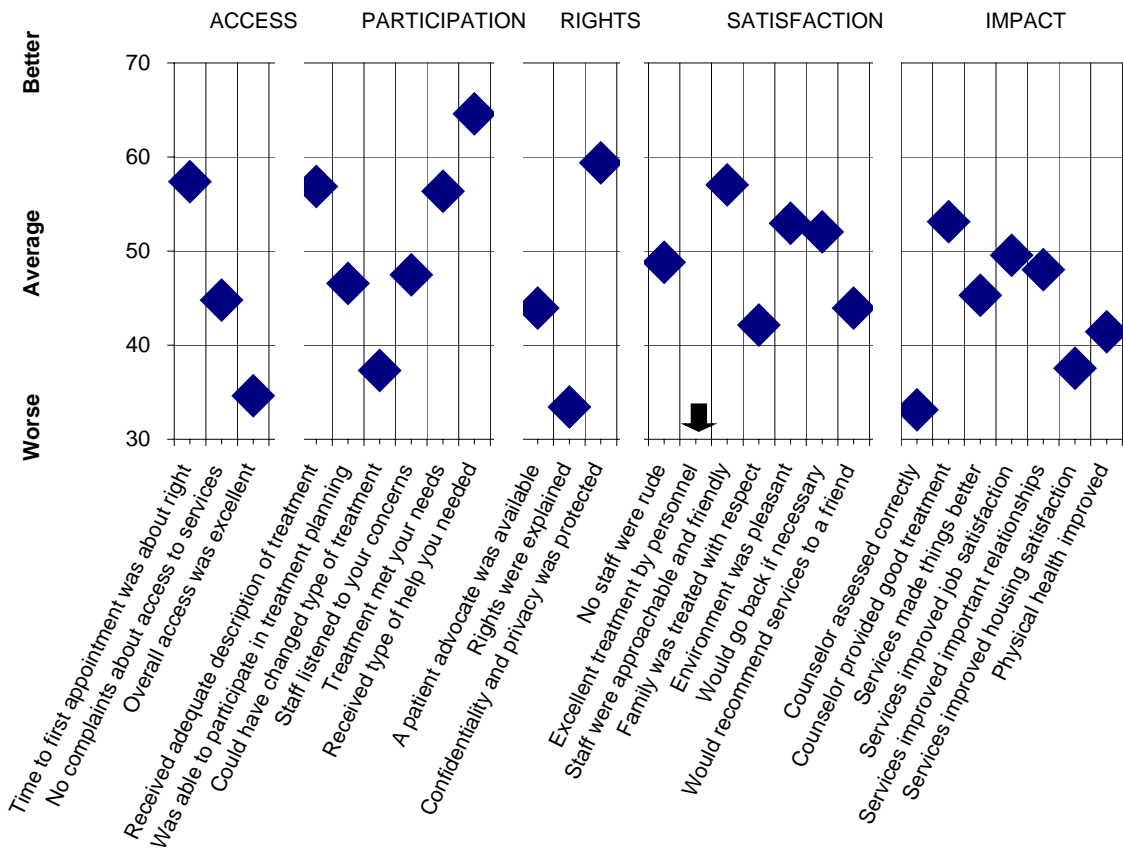
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# Howard Community Hospital Behavioral Health Services

(407)

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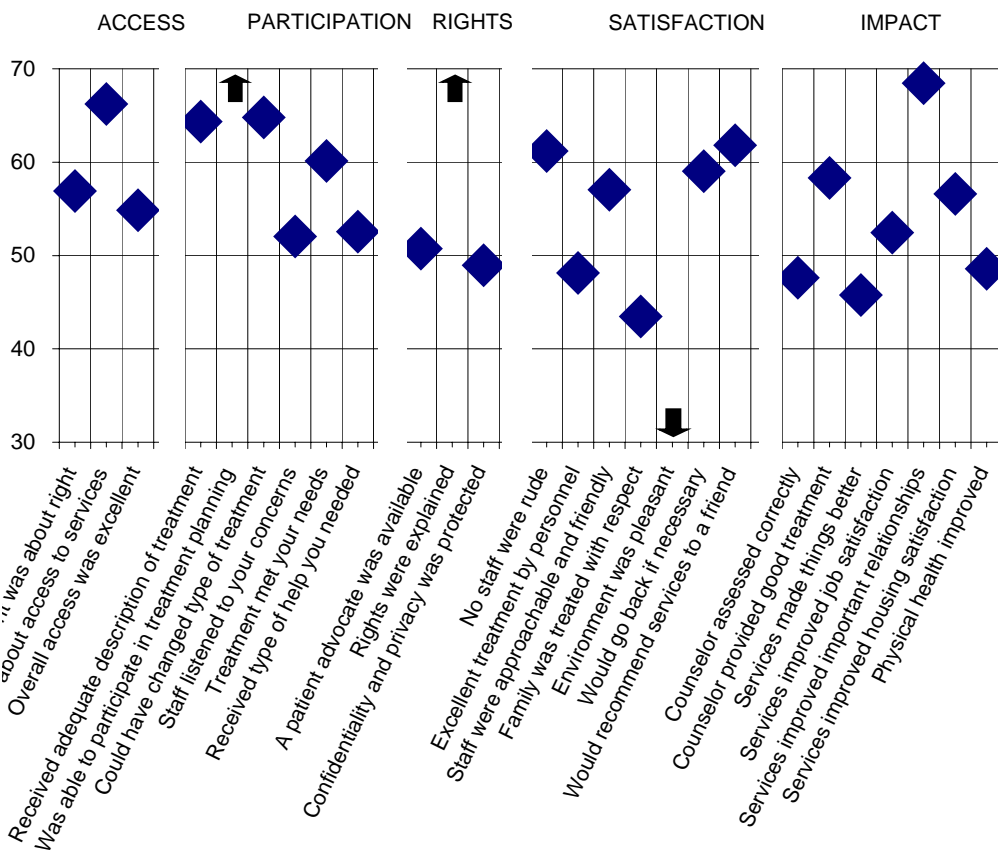
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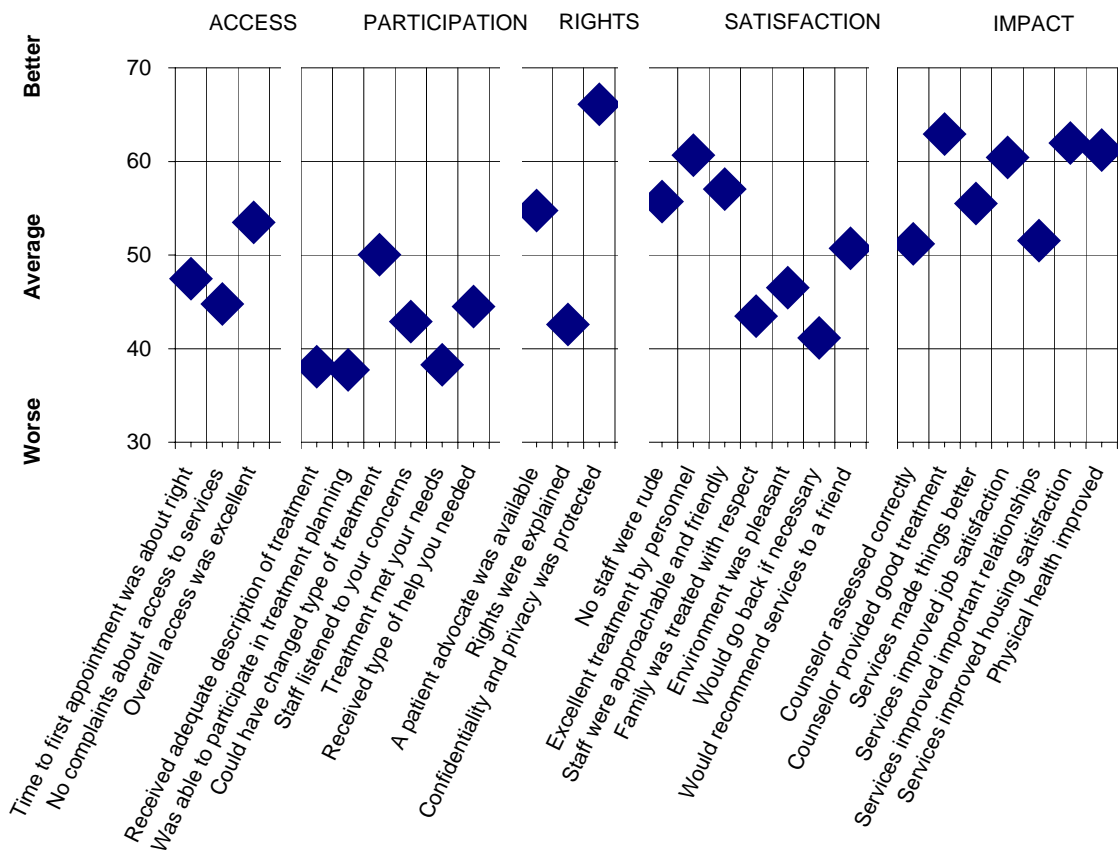
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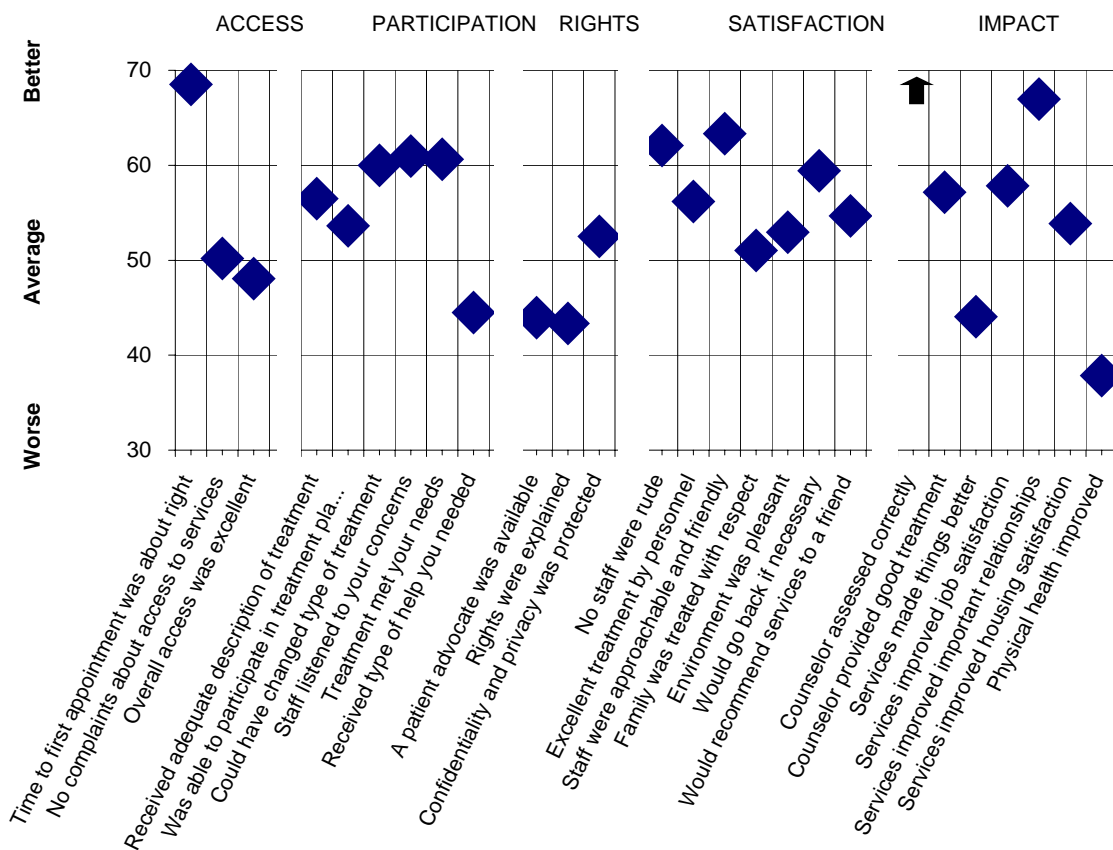
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# Swanson Center

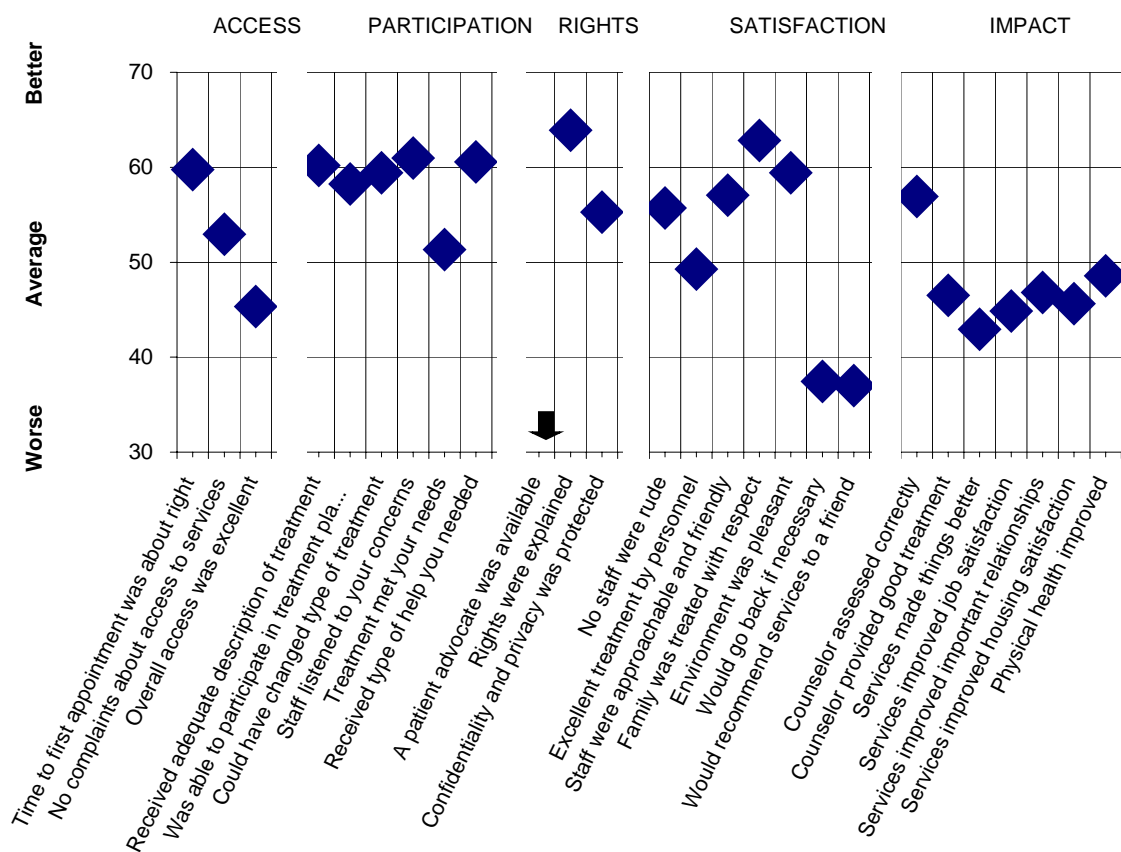
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# Center for Behavioral Health

(411)

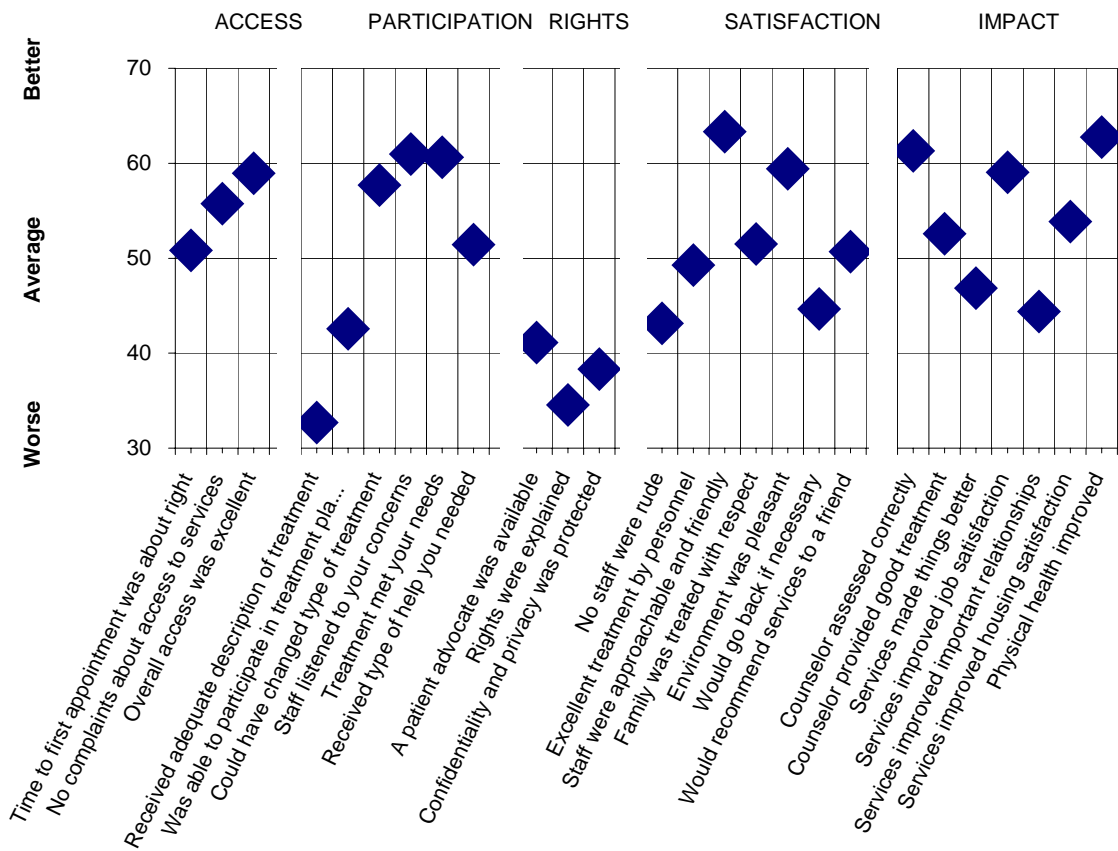
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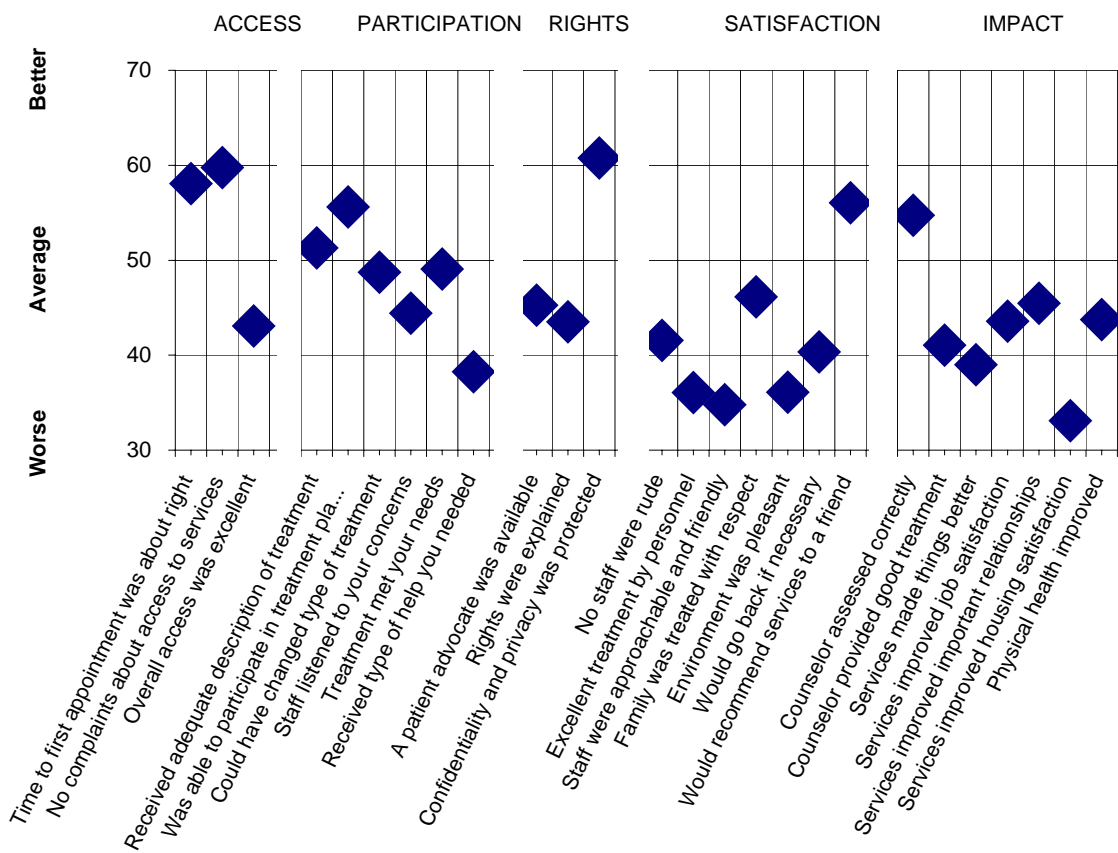
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# Community Mental Health Center

(413)

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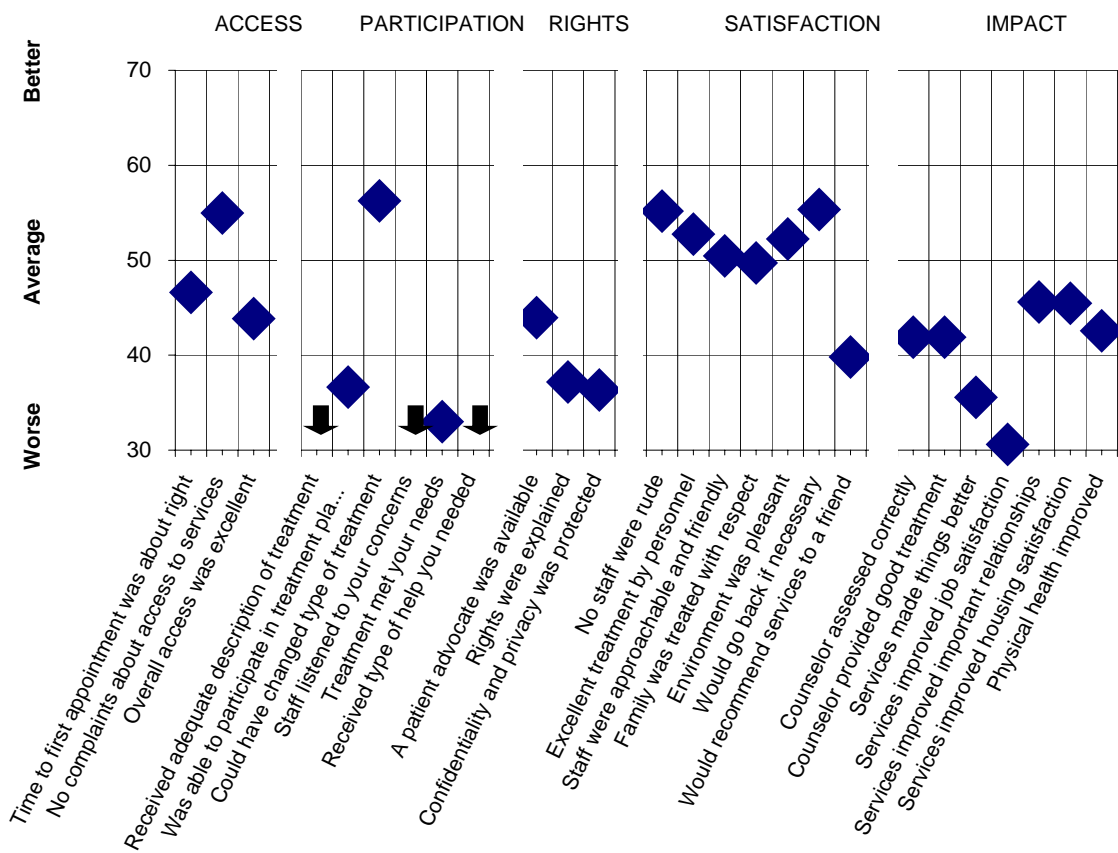
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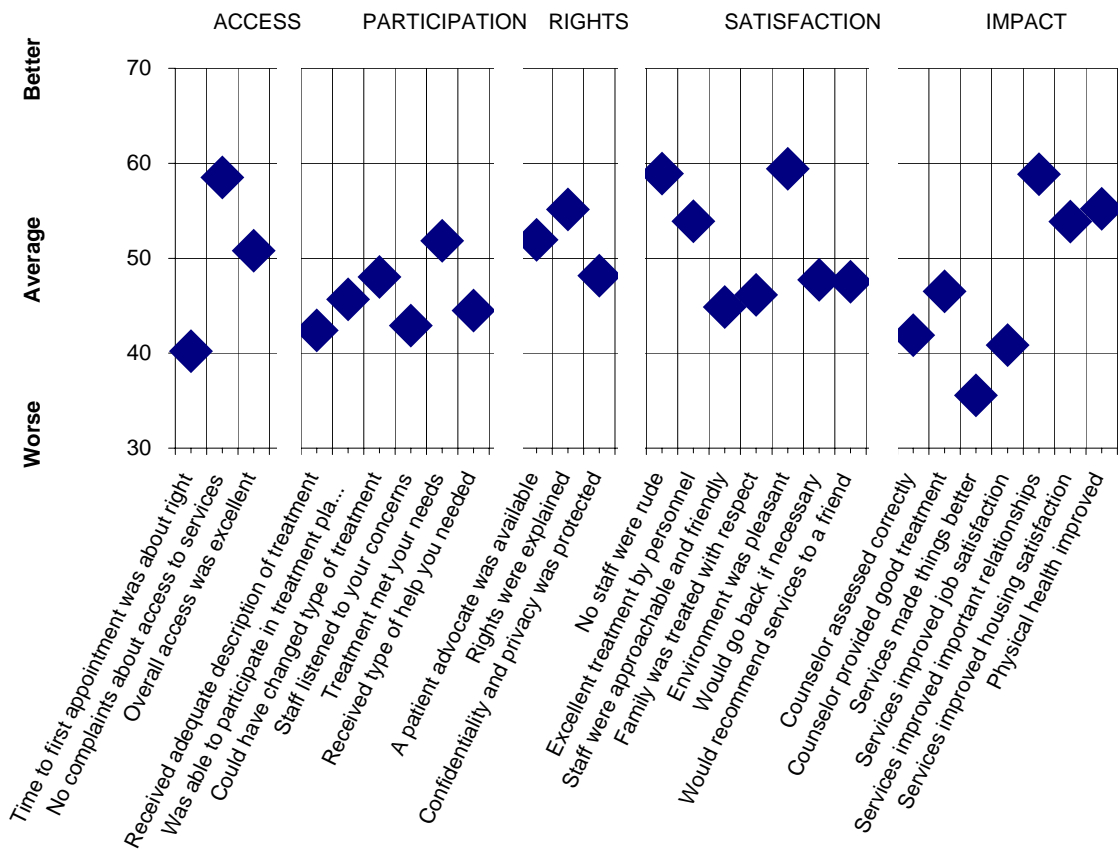
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# Wabash Valley Hospital, Inc.

(415)

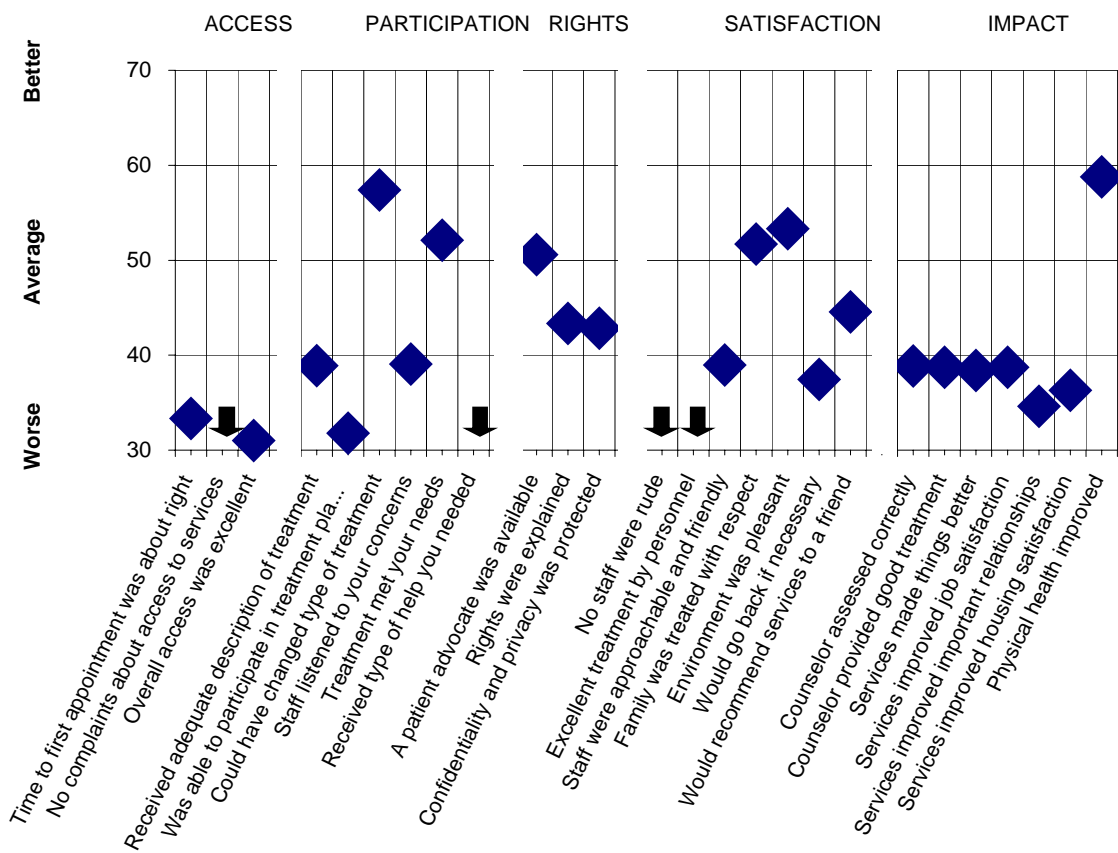
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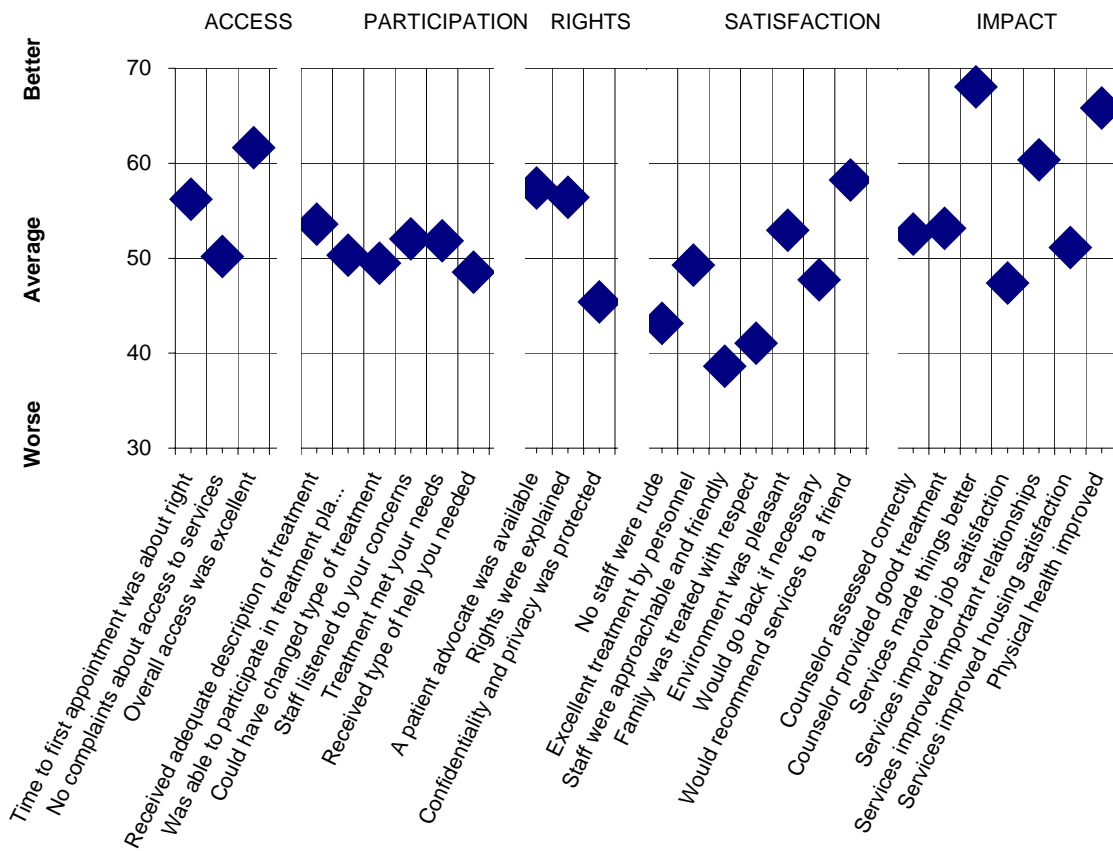
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CEO

(765) 983-8005

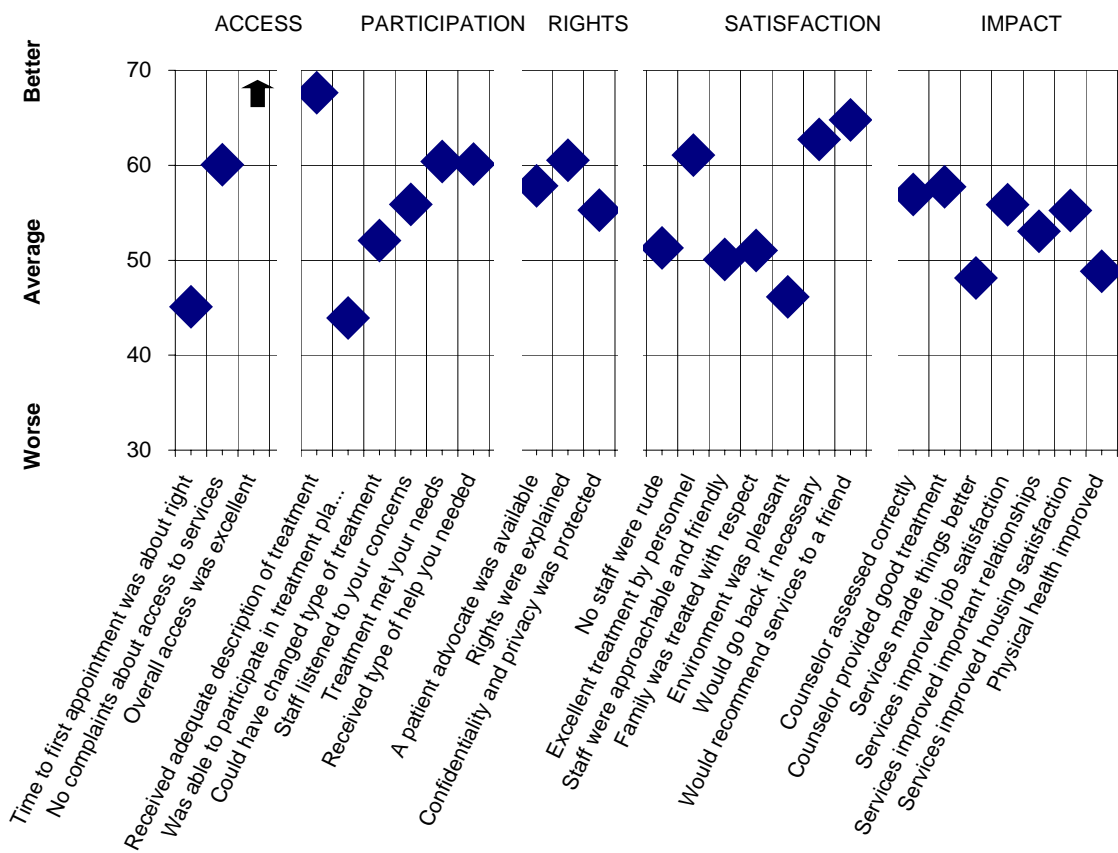
## Consumer Contact

Mary Ellen Kardong, MA

Chief, Employee & Comm Rel

(765) 983-8005

mek@dunncenter.org



# Porter-Starke Services

(418)

601 Wall Street

Valparaiso, IN 46383

(219) 531-3500

## CEO

Maryalice Larson

Interim CEO

(219) 531-3515

## Consumer Contact

Karl Cline, MA, CSW

VP Support Services

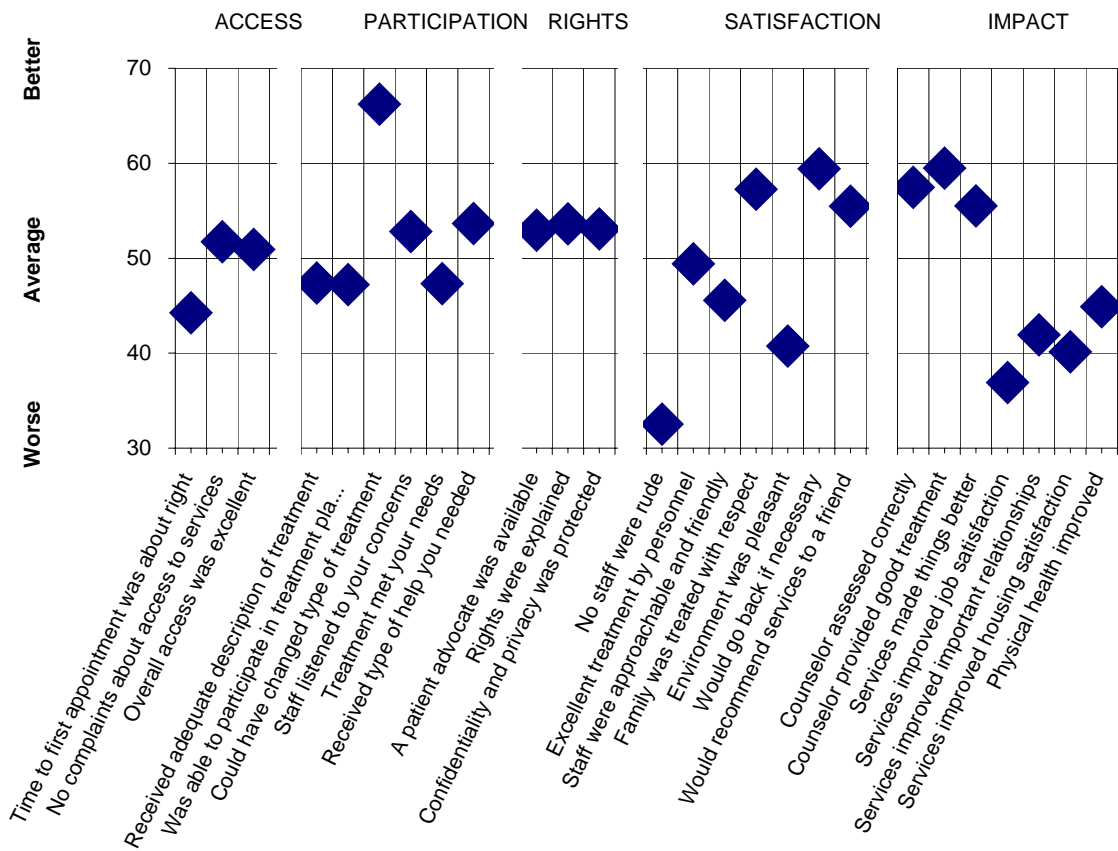
(219) 531-3649

Mary Idstein

CFO

(219) 531-3575

midstein@porterstarke.org



# Southern Hills Counseling Center, Inc.

(420)

P.O. Box 769, 480 Eversman Drive

Jasper, IN 47547-0769

(812) 482-3020

## CEO

Donald M. Arnoff, MA, LCSW

Executive Director

(812) 482-3020

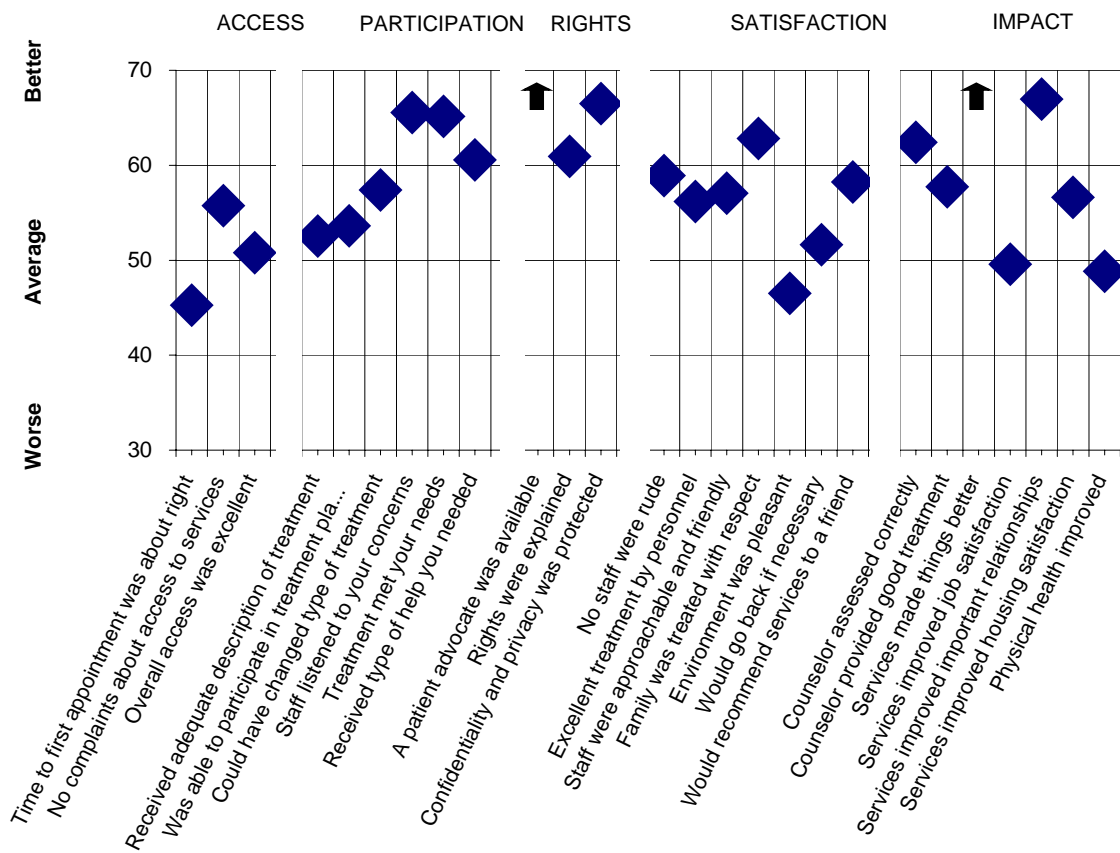
## Consumer Contact

Joe Kimmel, MSW, ACSW

Deputy Director

(812) 482-3020

jkimmel@southernhills.org



# Edgewater Systems for Balanced Living, Inc.

(421)

1100 West 6th Avenue

Gary, IN 46402

(219) 885-4264

## CEO

Danita Johnson-Hughes, MSW

CEO

(219) 885-4264

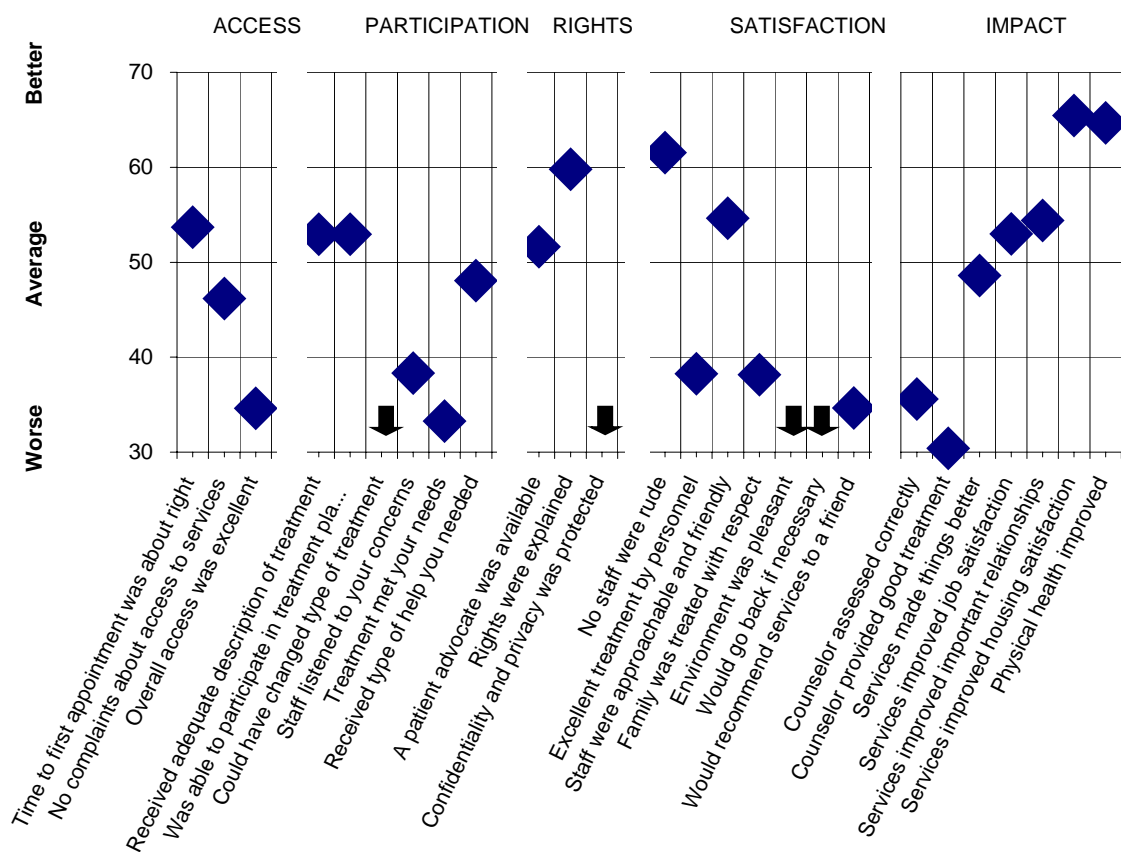
## Consumer Contact

Ashvin Sheth, ACSW, LCSW

Chief Clinical Officer

(219) 885-4264 ext. 2470

asheth@edgewatersystems.org



# Comprehensive Mental Health Services, Inc.

(422)  
240 North Tillotson  
Muncie, IN 47304  
(765) 288-1928

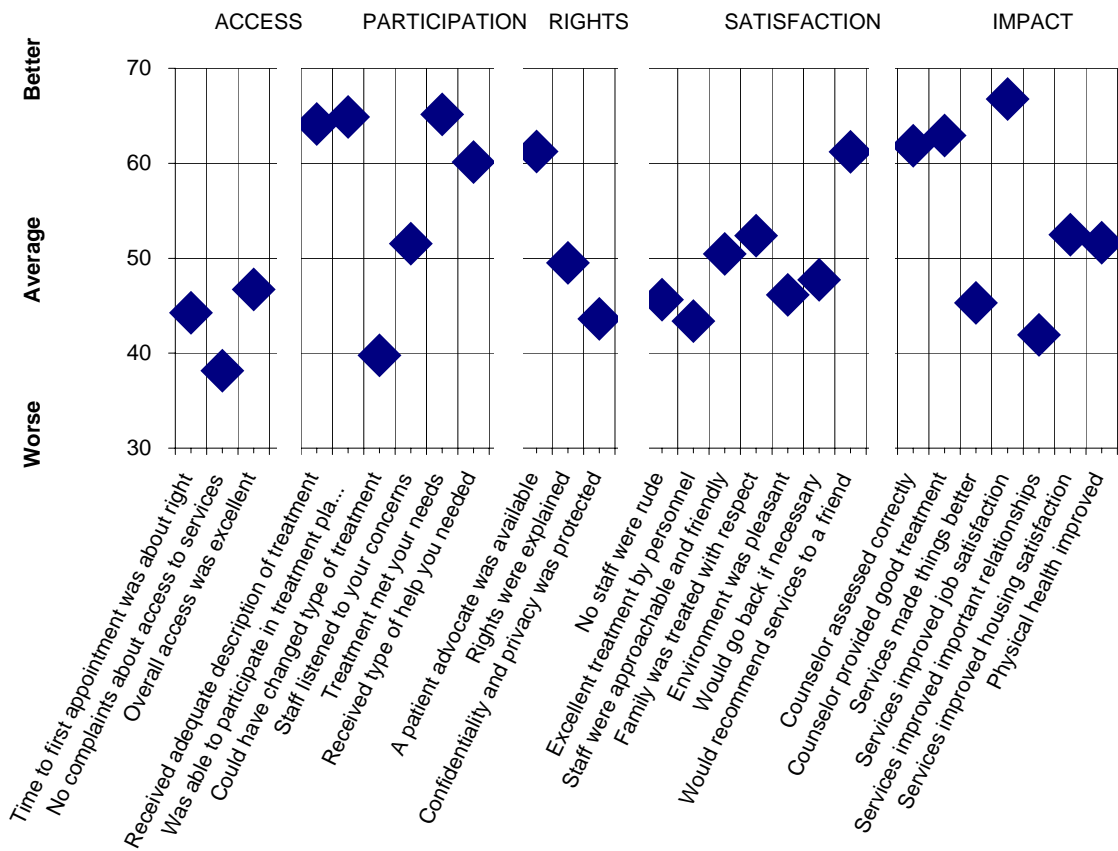
## CEO

Suzanne Gresham, Ph.D.  
President/CEO  
(765) 288-1928

## Consumer Contact

Ross Lane, Ph.D.  
Division Director  
(765) 521-2450

Robert Coles  
Division Director  
(219) 726-9348



# Bowen Center

(423)

P.O. Box 497, 850 N. Harrison Street

Warsaw, IN 46581-0497

(219) 267-7169

## CEO

Kurt Carlson, MS

President/CEO

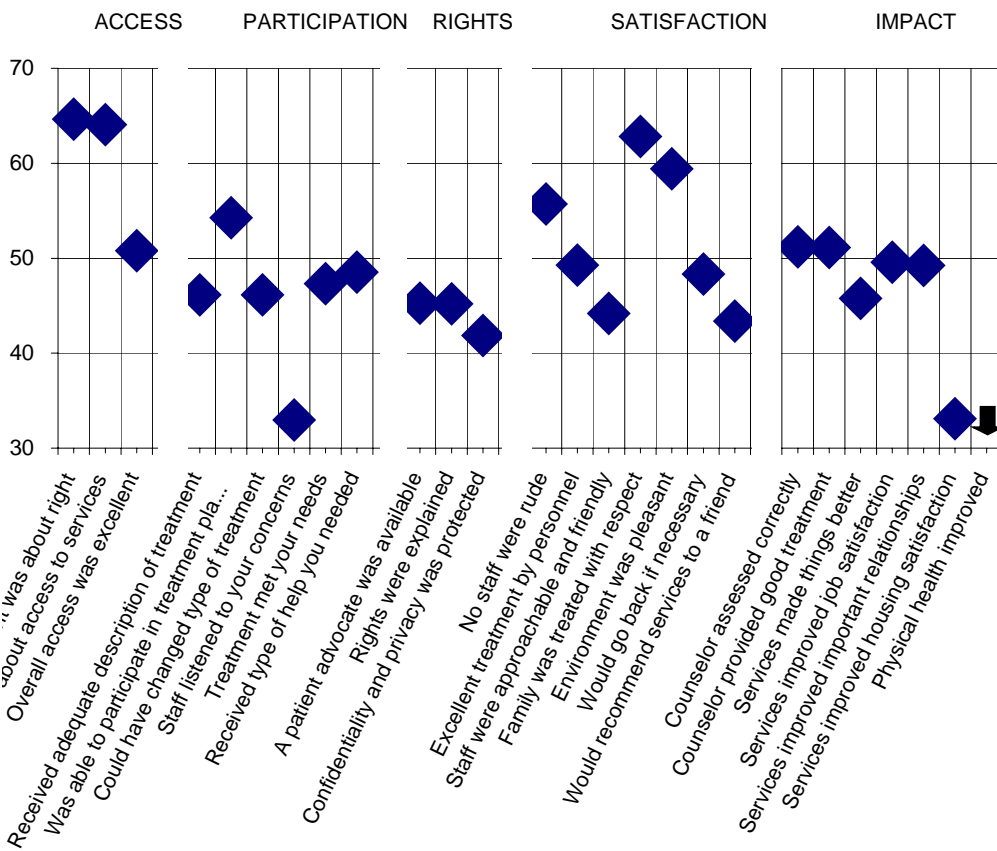
(219) 267-7169

## Consumer Contact

Sharon Engleschjon

Performance Improvement Specialist

(219) 267-7169



# Southlake Center for Mental Health

(424)

8555 Taft Street

Merrillville, IN 46410

(219) 769-4005

## CEO

Lee C. Strawhun

President

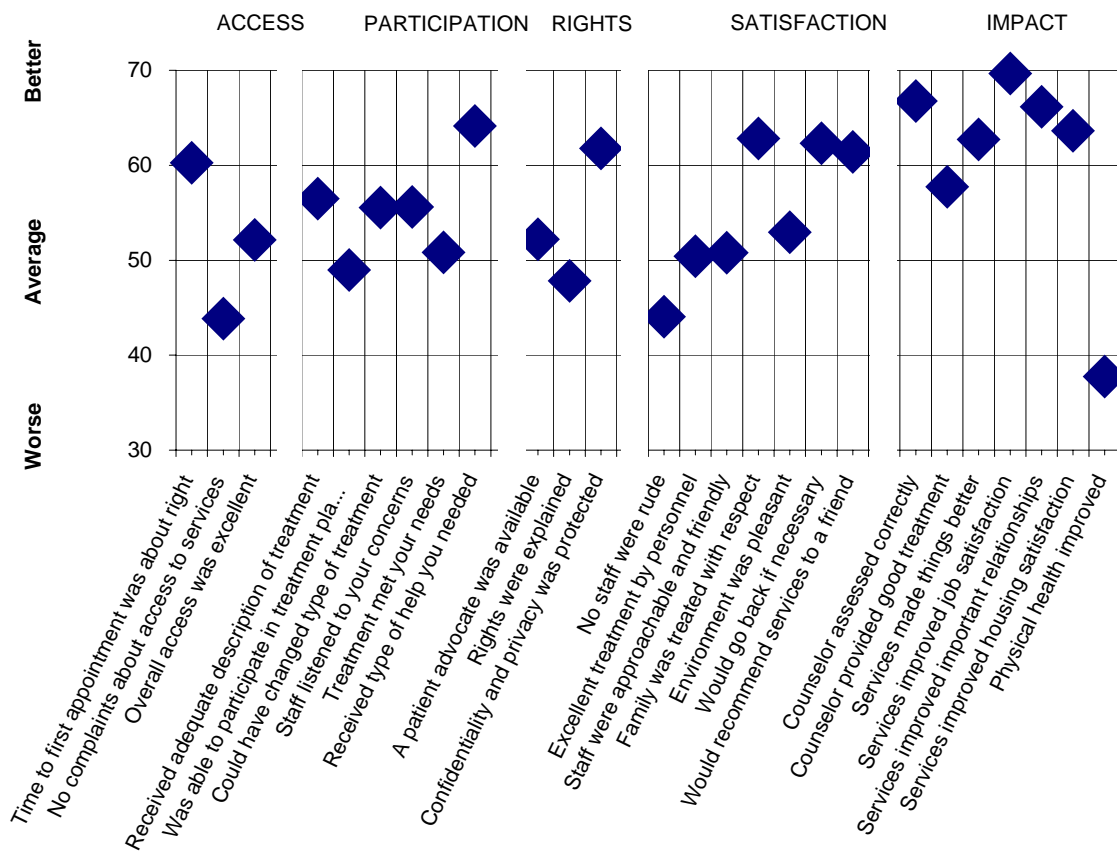
(219) 769-4005

## Consumer Contact

Les Schiller

Senior Vice President

(219) 769-4005



# The Center for Mental Health

(425)

P.O.Box 1258, 1100 Broadway

Anderson, IN 46015

(765) 649-8161

## CEO

C. Richard DeHaven, MA, MS

President/CEO

(765) 649-8161

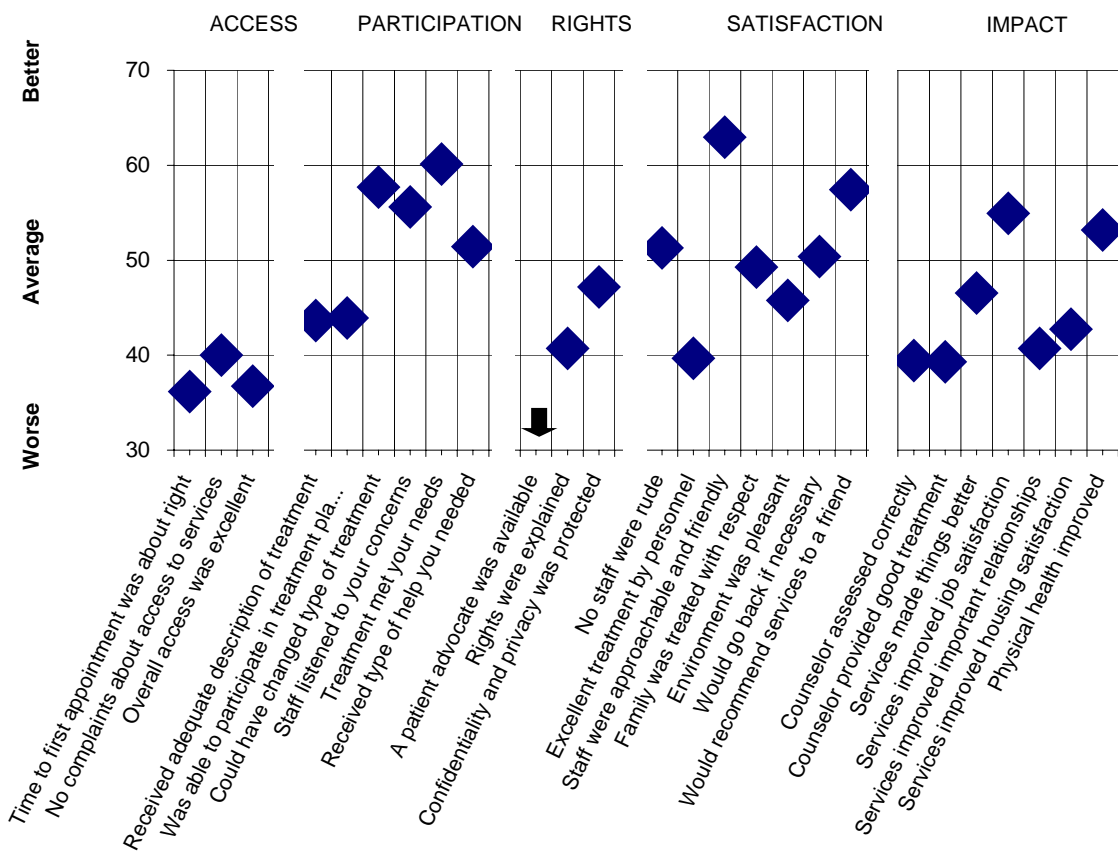
## Consumer Contact

Barbara Scott, MSW, LCSW

COO

(765) 649-8161

scottb@csmh.org





# Northeastern Center, Inc.

(426)

P.O. Box 817, 229 S. Main Street

Kendallville, IN 46755

(219) 347-4400

## CEO

Jerry Hollister, MBA, CPA

CEO

(219) 347-2453

## Consumer Contact

Sue Sprague, MSW, LCSW

Continuing Care Director

(219) 347-2453

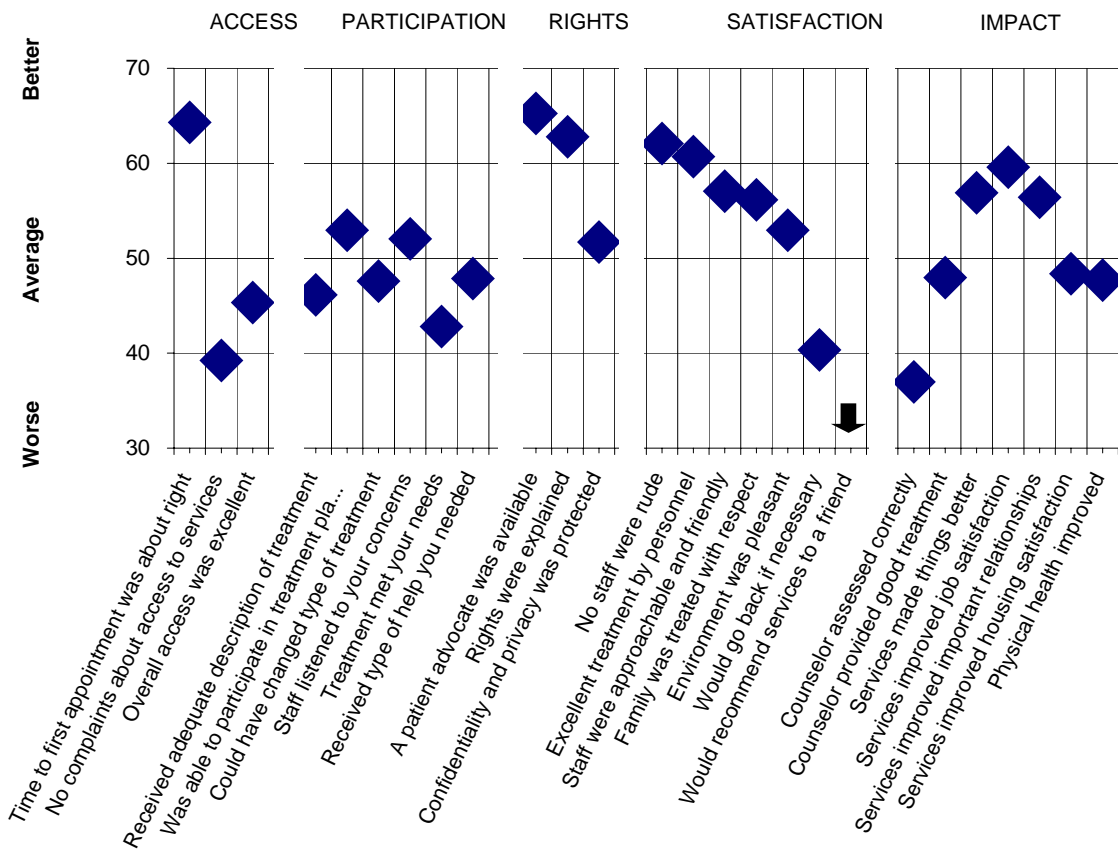
ssprague@northeasterncenter.org

Karen Markward, MS, LSW

Asst Continuing Care Director

(219) 347-4955

kmarkward@northeasterncenter.org



# Four County Counseling Center

(427)

1015 Michigan Avenue

Logansport, IN 46947

(219) 722-5151

## CEO

Lawrence R. Ulrich

Executive Director/CEO

(219) 722-5151 ext. 281

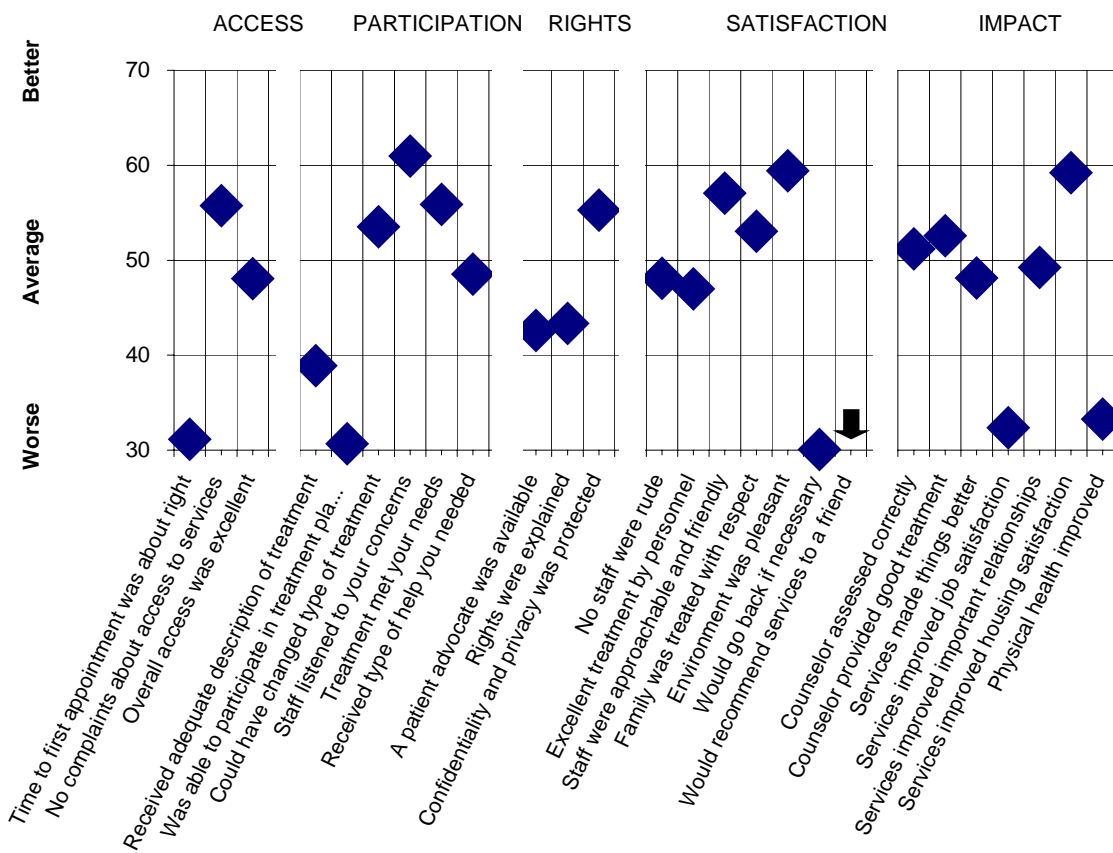
## Consumer Contact

Sandra Elliot

PQI

(219) 722-5151 ext. 277

selliot@fourcounty.com



# Cummins Mental Health Center

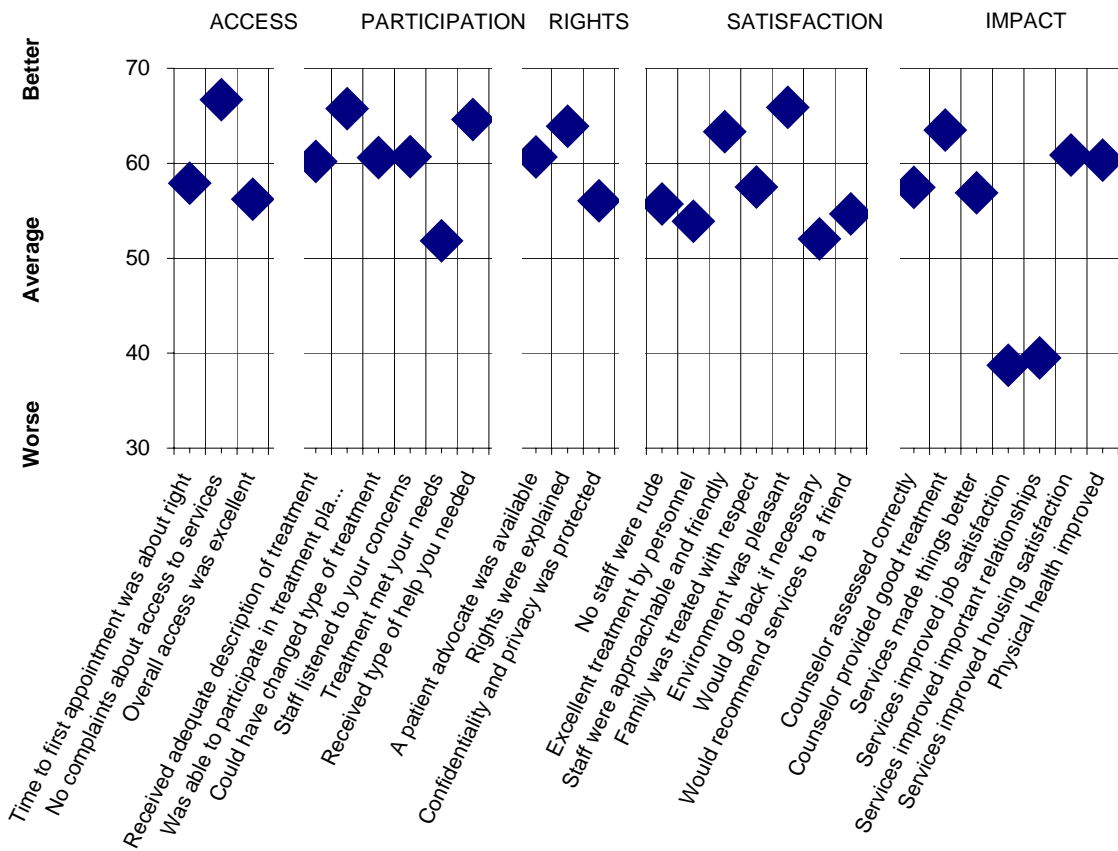
(428)  
6655 East US 36  
Avon, IN 46123  
(317) 272-3330

## CEO

Ann Borders, MA  
CEO  
(317) 272-3330

## Consumer Contact

Roxane Harcourt  
Director of County Operations  
(317) 272-3330



# Adult and Child Mental Health Center, Inc.

(429)

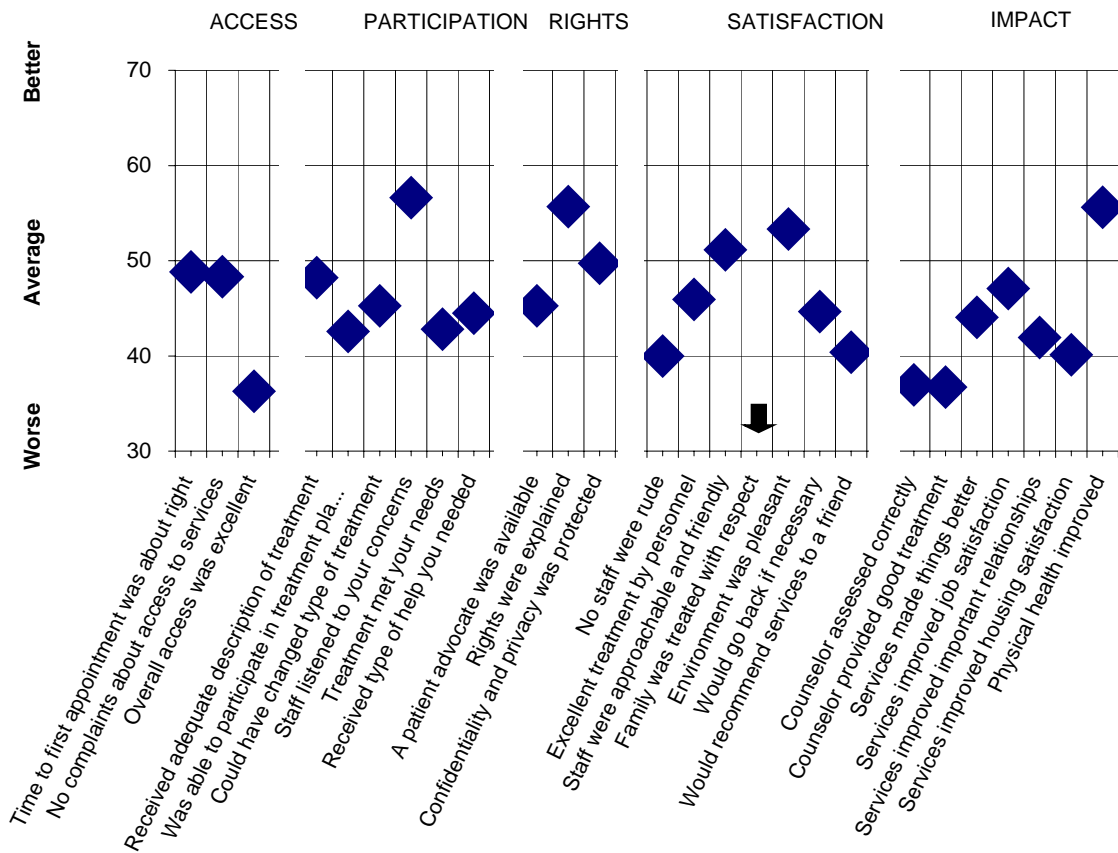
8320 Madison Avenue  
Indianapolis, IN 46227-8642  
(317) 882-5122

## CEO

A. Robert Dumbar, MAPA  
Executive Director  
(317) 882-5122

## Consumer Contact

Steve Pitts, BA  
Director Quality Improvement  
(317) 882-5122  
spitts@adultchild.org



# BehaviorCorp

(430)

697 Pro-Med Lane

Carmel, IN 46032

(317) 587-0500

## CEO

Larry L. Birch, ACSW

Executive Director

(317) 587-0500

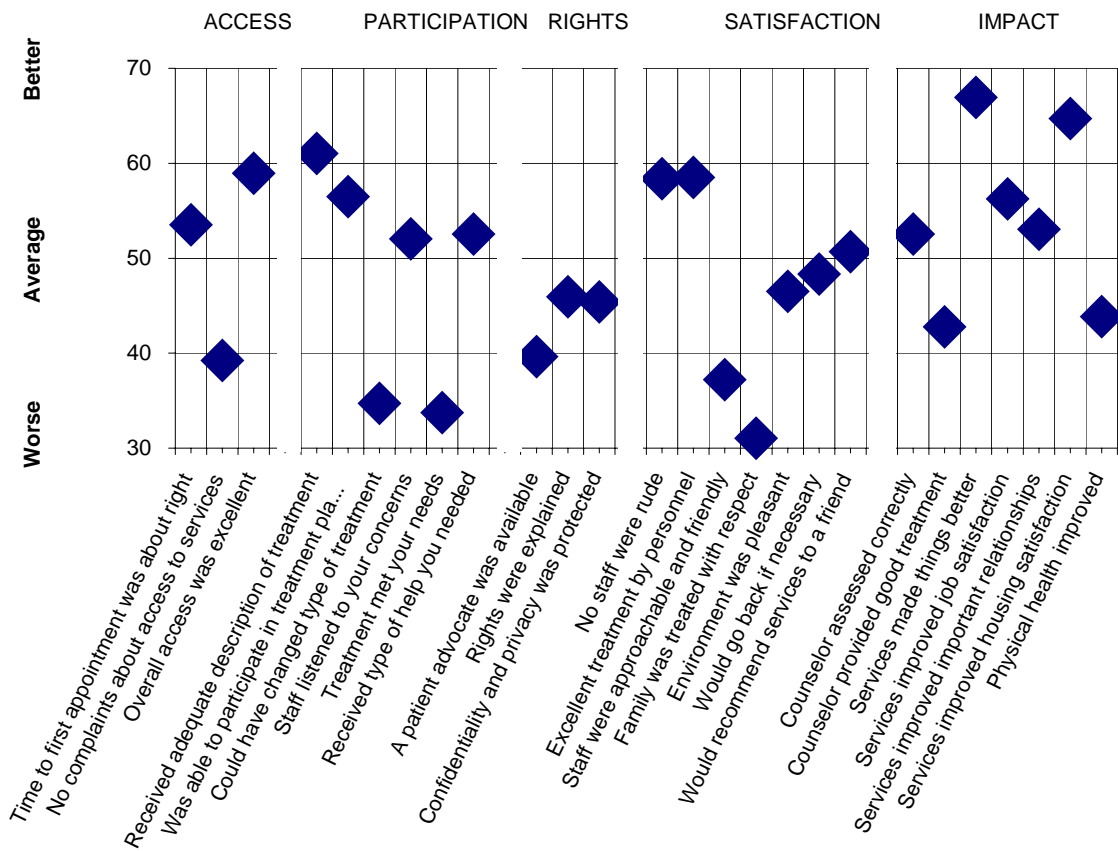
## Consumer Contact

Jeff Davis, Ph.D.

Assoc Dir., Clinical Programs

(317) 587-0546

[jdavis@behaviorcorp.org](mailto:jdavis@behaviorcorp.org)



## Glossary of Terms

**Chronic Addiction Disorder:** The Division of Mental Health definition of chronic addiction disorder is as follows:

- 1.) The individual has a substance-related disorder diagnosed under the Diagnostic and Statistical Manual of Mental Disorders, 4<sup>th</sup> edition (DSM-IV), published by the American Psychiatric Association.
- 2.) The individual experiences significant functional impairments in two of the following areas:
  - a.) Activities of daily living.
  - b.) Interpersonal functioning.
  - c.) Ability to live without recurrent use of chemicals.
  - d.) Psychological functions.
- 3.) The duration of the addiction has been in excess of twelve months. However, individuals who have experienced amnesic episodes (blackouts), or have experienced convulsions or other serious medical consequences of withdrawal from a chemical abuse, or who display significant dangerous as a results of chemical use, do not have to meet the durational requirements.

**Consumer:** A person who receives mental health or addiction services.

**Continuum of Care:** A core set of mental health services that Managed Care Providers, who are contracting with the Division of Mental Health, must offer to consumers. These services include the following:

- 1.) Individualized treatment planning to increase coping skills and symptom management, which may include any combination of services listed below.
- 2.) Twenty-four hour a day crisis intervention.
- 3.) Case management to fulfill individual consumer needs, including assertive case management when indicated.
- 4.) Outpatient services, including intensive outpatient services, substance abuse services, counseling, and treatment.
- 5.) Acute stabilization services including detoxification services.
- 6.) Residential services.
- 7.) Day treatment.
- 8.) Family support services.

- 9.) Medication evaluation and monitoring.
- 10.) Services to prevent unnecessary and inappropriate treatment and hospitalization and the deprivation of a person's liberty.

**Division of Mental Health (DMH):** The state agency that regulates and certifies mental health services in Indiana.

**Hoosier Assurance Plan (HAP):** The Division of Mental Health managed care strategy designed to reform the method of funding and the delivery of mental health and addiction services in Indiana.

**Hoosier Assurance Plan Assessment Instruments:** The assessment tools used by all Managed Care Providers to determine the eligibility of consumers who receive mental health services under the Hoosier Assurance Plan. The assessments are done yearly. The assessment for adults is known as the Hoosier Assurance Plan Instrument for Adults (HAP-I) and the assessment tool for children is known as the Child and Adolescent Functional Assessment Scale (CA-FAS): Miniscale.

**K.E.Y. (Knowledge Empowers You) Consumer Organization:** A consumer organization in Indiana whose mission is to educate consumers on their rights and assist consumers in asserting their rights.

**Managed Care:** Various strategies that seek to get the best services by controlling the services' utilization, promoting their quality, and measuring performance to ensure effectiveness.

**Managed Care Provider (MCP):** Forty-two mental health service providers, including thirty community mental health centers, who are eligible for Hoosier Assurance Plan managed care funding. All these providers must agree to offer the full continuum of care. The Division of Mental Health must approve and certify the MCP. All MCPs are represented in these report cards.

**Outcomes:** A form of measuring consumer experience designed to help consumers, payer, and providers make rational health care-related

choices based on better insight into the effect of these choices on the consumer's life.

**Serious Emotional Disturbance (Children):**

The Division of Mental Health definition of serious emotional disturbance is as follows:

- 1.) The child has a mental illness diagnosis under the DSM-IV, published by the American Psychiatric Association.
- 2.) The child experiences significant functional impairments in at least one of the following areas:
  - a.) Activities of daily living.
  - b.) Interpersonal functioning.
  - c.) Concentration, persistence, and pace.
  - d.) Adaptation to change.
- 3.) The duration of the disorder has been, or is expected to be, in excess of twelve months. However, children who have experienced a situational trauma, and who are receiving services in two or more community agencies, do not have to meet the durational requirement of this clause.

**Seriously Mentally Ill (Adult):** The Division of Mental Health definition of seriously mentally ill adult is as follows:

- 1.) The individual has a mental illness diagnosis under the Diagnostic and Statistical Manual of Mental Disorders, 4<sup>th</sup> edition (DSM IV),

published by the American Psychiatric Association.

- 2.) The individual experiences significant functional impairment in two of the following areas:
  - a.) Activities of daily living.
  - b.) Interpersonal functioning.
  - c.) Concentration, persistence, and pace.
  - d.) Adaptation to change.
- 3.) The duration of the mental illness has been, or is expected to be, in excess of twelve months. However, adults who have experienced a situational trauma so not have to meet the durational requirement of this clause.

**S.H.A.P.E.:** Acronym for Serving the Hoosier Assurance Plan through Education, a new initiative of the Indiana Family and Social Services Administration - Division of Mental Health to make HAP information more accessible to Hoosiers. [Accessible through a web site ([http://www.in.gov/fssa/shape/shape\\_home.html](http://www.in.gov/fssa/shape/shape_home.html)) and toll-free hotline (1-800-813-6511)]

**Staff Turnover:** The rate at which staff remain employed at a place of employment. High staff turnover means staff come and go frequently. Low staff turnover means staff work at their place of employment for a relatively long time.

## Data Tables

These pages include tables that provides background information data that is graphed on the provider pages. There is one table for each of the summary areas, and one column for each question.

<b>Access</b>			
Provider	Time to first appointment was about right	No complaints about access to services	Overall access was excellent
401	83.7%	67.9%	53.6%
402	81.8%	69.6%	53.6%
403	72.9%	69.6%	48.2%
404	72.9%	75.4%	57.9%
405	84.1%	70.2%	45.6%
406	86.4%	67.9%	37.5%
407	86.1%	81.8%	50.9%
408	80.5%	67.9%	50.0%
409	93.0%	71.4%	46.4%
410	87.8%	73.2%	44.6%
411	82.5%	75.0%	53.6%
412	86.8%	77.6%	43.1%
413	80.0%	74.5%	43.6%
414	76.2%	76.8%	48.2%
415	72.1%	50.9%	35.1%
416	85.7%	71.4%	55.4%
417	79.1%	77.8%	64.8%
418	78.6%	72.4%	48.3%
420	79.2%	75.0%	48.2%
421	84.2%	68.8%	37.5%
422	78.6%	63.6%	45.5%
423	90.7%	80.4%	48.2%
424	88.1%	67.3%	49.1%
425	73.8%	64.8%	38.9%
426	90.5%	64.3%	44.6%
427	70.8%	75.0%	46.4%
428	86.7%	82.1%	51.8%
429	81.3%	70.2%	38.6%
430	84.1%	64.3%	53.6%
Average	82.0%	71.3%	47.7%
Standard Deviation	5.9%	6.5%	6.6%
Maximum	93.0%	82.1%	64.8%
Minimum	70.8%	50.9%	35.1%



<b>Participation</b>						
Provider	Received adequate description of treatment	Was able to participate in treatment planning	Could have changed type of treatment	Staff listened to your concerns	Treatment met your needs	Received type of help you needed
401	81.8%	85.7%	65.5%	89.3%	94.6%	87.5%
402	89.3%	83.3%	63.5%	87.5%	87.3%	85.7%
403	85.7%	78.6%	69.8%	91.1%	87.5%	83.9%
404	83.9%	89.5%	77.8%	92.9%	91.2%	85.7%
405	85.7%	78.6%	69.1%	83.9%	82.5%	75.4%
406	89.1%	80.4%	64.3%	89.3%	92.9%	91.1%
407	92.7%	91.1%	83.3%	91.1%	94.4%	85.7%
408	80.0%	76.4%	73.1%	87.5%	85.7%	82.1%
409	88.9%	83.6%	80.0%	94.6%	94.6%	82.1%
410	90.7%	85.7%	79.6%	94.6%	90.9%	89.3%
411	77.4%	78.6%	78.4%	94.6%	94.6%	85.2%
412	86.4%	84.5%	72.2%	88.1%	90.0%	79.3%
413	73.6%	75.9%	77.4%	79.6%	83.6%	74.1%
414	82.1%	80.0%	71.7%	87.5%	91.1%	82.1%
415	80.4%	73.7%	78.2%	86.0%	91.2%	75.4%
416	87.5%	82.1%	72.7%	91.1%	91.1%	83.9%
417	94.3%	79.2%	74.5%	92.6%	94.5%	89.1%
418	84.5%	80.7%	84.3%	91.4%	89.3%	86.2%
420	87.0%	83.6%	78.2%	96.4%	96.4%	89.3%
421	87.2%	83.3%	54.2%	85.7%	83.7%	83.7%
422	92.6%	88.7%	66.0%	90.9%	96.4%	89.1%
423	83.9%	83.9%	70.4%	83.6%	89.3%	83.9%
424	88.9%	81.5%	76.9%	92.5%	90.7%	90.9%
425	82.7%	79.2%	78.4%	92.5%	94.4%	85.2%
426	83.9%	83.3%	71.4%	91.1%	87.5%	83.6%
427	80.4%	73.2%	75.5%	94.6%	92.7%	83.9%
428	90.7%	89.1%	80.4%	94.5%	91.1%	91.1%
429	84.9%	78.6%	69.8%	92.9%	87.5%	82.1%
430	91.1%	84.9%	62.5%	91.1%	83.9%	85.7%
Average	85.8%	82.0%	73.1%	90.3%	90.4%	84.6%
Standard Deviation	4.8%	4.5%	6.9%	3.9%	4.0%	4.5%
Maximum	94.3%	91.1%	84.3%	96.4%	96.4%	91.1%
Minimum	73.6%	73.2%	54.2%	79.6%	82.5%	74.1%

<b>Rights</b>			
Provider	A patient advocate was available	Rights were explained	Confidentiality and privacy was protected
401	58.9%	70.9%	85.5%
402	52.7%	75.9%	73.2%
403	50.9%	83.6%	76.4%
404	53.6%	74.1%	73.2%
405	53.6%	78.6%	77.2%
406	49.1%	69.2%	82.1%
407	53.7%	88.9%	76.8%
408	56.4%	74.1%	85.5%
409	49.1%	74.5%	78.6%
410	39.6%	85.5%	80.0%
411	47.2%	69.8%	71.4%
412	50.0%	74.6%	82.8%
413	49.1%	71.2%	70.4%
414	54.5%	80.8%	76.4%
415	53.6%	74.5%	73.7%
416	58.2%	81.5%	75.0%
417	58.5%	83.7%	80.0%
418	55.2%	80.0%	78.9%
420	72.2%	83.9%	85.7%
421	54.3%	83.3%	62.5%
422	60.8%	77.8%	74.1%
423	50.0%	75.5%	73.2%
424	54.7%	76.9%	83.3%
425	38.5%	73.1%	75.9%
426	63.5%	84.9%	78.2%
427	48.2%	74.5%	80.0%
428	60.4%	85.5%	80.4%
429	50.0%	81.1%	77.2%
430	46.2%	75.9%	75.0%
Average	53.2%	78.1%	77.3%
Standard Deviation	6.8%	5.3%	5.1%
Maximum	72.2%	88.9%	85.7%
Minimum	38.5%	69.2%	62.5%

<b>Satisfaction</b>							
Provider	No staff were rude	Excellent treatment by personnel	Staff were approachable and friendly	Family was treated with respect	Environment was pleasant	Would go back if necessary	Would recommend services to a friend
401	85.2%	60.7%	94.6%	100.0%	100.0%	94.5%	92.9%
402	76.4%	51.8%	94.5%	95.7%	91.1%	90.9%	89.3%
403	71.4%	49.1%	91.1%	91.3%	92.9%	89.1%	87.5%
404	82.5%	63.2%	93.0%	100.0%	98.2%	87.7%	86.0%
405	69.8%	49.1%	86.0%	90.5%	96.5%	86.0%	87.7%
406	78.2%	32.1%	96.4%	90.7%	96.4%	85.7%	83.9%
407	85.2%	47.3%	96.4%	91.3%	89.3%	89.1%	92.9%
408	82.1%	57.1%	96.4%	91.3%	94.6%	80.4%	87.3%
409	85.7%	53.6%	98.2%	94.7%	96.4%	89.3%	89.3%
410	82.1%	48.2%	96.4%	100.0%	98.2%	78.6%	80.4%
411	75.0%	48.2%	98.2%	94.9%	98.2%	82.1%	87.3%
412	74.1%	37.9%	90.0%	92.5%	91.7%	80.0%	90.0%
413	81.8%	50.9%	94.5%	94.1%	96.2%	87.3%	81.8%
414	83.9%	51.8%	92.9%	92.5%	98.2%	83.6%	85.7%
415	64.9%	28.1%	91.2%	95.0%	96.5%	78.6%	84.2%
416	75.0%	48.2%	91.1%	90.2%	96.4%	83.6%	91.1%
417	79.6%	57.4%	94.4%	94.7%	94.5%	90.9%	94.4%
418	69.0%	48.3%	93.1%	97.5%	93.0%	89.3%	89.7%
420	83.9%	53.6%	96.4%	100.0%	94.6%	85.5%	91.1%
421	85.4%	39.6%	95.7%	88.9%	89.6%	74.5%	79.2%
422	76.4%	43.6%	94.5%	95.3%	94.5%	83.6%	92.6%
423	82.1%	48.2%	92.7%	100.0%	98.2%	83.9%	83.6%
424	75.5%	49.1%	94.6%	100.0%	96.4%	90.7%	92.7%
425	79.6%	40.7%	98.1%	93.9%	94.4%	84.9%	90.7%
426	85.7%	57.1%	96.4%	97.0%	96.4%	80.0%	76.4%
427	77.8%	46.4%	96.4%	95.6%	98.2%	75.0%	75.0%
428	82.1%	51.8%	98.2%	97.6%	100.0%	85.7%	89.3%
429	73.2%	45.6%	94.7%	81.8%	96.5%	82.1%	82.1%
430	83.6%	55.4%	90.7%	85.7%	94.6%	83.9%	87.3%
Average	78.9%	48.8%	94.4%	94.2%	95.6%	84.7%	86.9%
Standard Deviation	5.7%	7.8%	2.9%	4.5%	2.8%	4.9%	5.0%
Maximum	85.7%	63.2%	98.2%	100.0%	100.0%	94.5%	94.4%
Minimum	64.9%	28.1%	86.0%	81.8%	89.3%	74.5%	75.0%

## Impact of Services

Provider	Counselor assessed correctly	Counselor provided good treatment	Services made things better	Services improved job satisfaction	Services improved important relationships	Services improved housing satisfaction	Physical health improved
401	85.7%	90.9%	52.7%	66.7%	51.8%	48.2%	60.8%
402	85.5%	88.9%	44.6%	33.3%	53.6%	44.6%	64.7%
403	87.5%	83.9%	49.1%	61.5%	50.0%	54.7%	63.5%
404	85.7%	86.0%	51.8%	50.0%	64.3%	57.9%	47.2%
405	81.8%	78.2%	34.5%	47.1%	41.1%	42.1%	60.8%
406	80.4%	87.5%	42.6%	50.0%	54.5%	42.9%	50.0%
407	85.7%	89.3%	42.9%	53.8%	69.6%	55.4%	55.6%
408	87.0%	90.9%	49.1%	64.3%	57.1%	58.9%	65.5%
409	94.3%	88.9%	41.8%	60.9%	68.5%	53.6%	47.2%
410	89.1%	85.2%	41.1%	43.8%	53.6%	48.2%	55.6%
411	90.7%	87.3%	43.6%	62.5%	51.8%	53.6%	66.7%
412	88.3%	83.3%	38.6%	42.1%	52.6%	40.0%	51.8%
413	83.6%	83.6%	36.4%	25.0%	52.7%	48.1%	50.9%
414	83.6%	85.2%	36.4%	38.5%	62.5%	53.6%	60.8%
415	82.5%	82.5%	38.2%	35.7%	44.6%	42.1%	63.6%
416	87.5%	87.5%	57.1%	47.1%	63.6%	51.8%	69.1%
417	89.1%	89.1%	44.4%	58.3%	58.2%	54.5%	55.8%
418	89.3%	89.7%	49.1%	33.3%	50.0%	44.6%	52.7%
420	91.1%	89.1%	58.5%	50.0%	68.5%	55.4%	55.8%
421	81.3%	79.6%	44.7%	54.5%	59.2%	61.2%	68.2%
422	90.9%	90.9%	42.6%	72.7%	50.0%	52.7%	58.0%
423	87.0%	86.8%	42.9%	50.0%	55.4%	40.0%	37.7%
424	92.7%	89.1%	53.7%	76.5%	67.9%	60.0%	47.1%
425	82.7%	82.7%	43.4%	57.1%	49.1%	46.3%	59.2%
426	81.8%	85.7%	50.0%	63.2%	60.7%	50.0%	54.9%
427	87.0%	87.3%	44.4%	27.3%	55.4%	57.1%	43.6%
428	89.3%	91.1%	50.0%	35.7%	48.2%	58.2%	64.8%
429	81.8%	81.8%	41.8%	46.7%	50.0%	44.6%	61.1%
430	87.5%	83.9%	56.4%	58.8%	58.2%	60.7%	51.9%
Average	86.6%	86.4%	45.6%	50.6%	56.0%	51.1%	56.7%
Standard Deviation	3.7%	3.5%	6.4%	13.2%	7.4%	6.6%	7.8%
Maximum	94.3%	91.1%	58.5%	76.5%	69.6%	61.2%	69.1%
Minimum	80.4%	78.2%	34.5%	25.0%	41.1%	40.0%	37.7%